

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 774

## BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> John Edwards for President		<b>2. IDENTIFICATION NUMBER</b> C00431205	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1705 DeSales Street 8th Floor			
<b>CITY, STATE, and ZIP CODE</b> Washington                      DC                      20036		<b>3. IS THIS REPORT FOR :</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	

**4. TYPE OF REPORT** (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report

Monthly Report Due On:  

☐ February 20  
☐ March 20  
☒ April 20  
☐ May 20

☐ June 20  
☐ July 20  
☐ August 20  
☐ September 20

☐ October 20  
☐ November 20  
☐ December 20  
☐ January 31

☐ Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_  
☐ Thirtieth day report following the General Election on \_\_\_\_\_  
 on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT      ☐ YES      ☒ NO

5. COVERING PERIOD	FROM 03/01/2008	THROUGH 03/31/2008
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<b>SUMMARY</b>	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD .....	4973178.29
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) .....	4473699.27
	8. SUBTOTAL (Lines 6 and 7) .....	9446877.56
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	8356765.86
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) .....	1090111.70
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	1702460.85
	13. EXPENDITURES SUBJECT TO LIMITATION .....	0.00
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	35243557.50
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....	39321860.37

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer <b>Julius Chambers</b>	Date 04/20/2008
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b>	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100
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**FEC FORM 3P**  
**(01/2001)**

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 774**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**John Edwards for President**

Report Covering the Period

From: 03/01/2008

To: 03/31/2008

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	4344469.26	7404068.77
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	-13301.15	38975105.53
(b) Political Party Committees	.....	0.00	200.00
(c) Other Political Committees	.....	0.00	20.00
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		-13301.15	38975325.53
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	8974714.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	8974714.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	138539.03	969384.50
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		138539.03	969384.50
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	3992.13	155248.68
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	4473699.27	56478741.48
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	130848.44	40291244.87
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	391848.45	3746635.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	33610.61	176298.09
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	4344369.26	4344369.26
(b) Other Repayments	.....	0.00	3059599.51
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	4344369.26	7403968.77
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	3456089.10	3731768.03
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	3456089.10	3731768.03
29. OTHER DISBURSEMENTS	.....	0.00	267.84
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	8356765.86	55350182.60
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE** 3 / 774  
**(Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)**  
(PAGE 3, FEC FORM 3P)

**1. NAME OF COMMITTEE (in full)**

**John Edwards for President**

**ADDRESS (number and street)**

1705 DeSales Street  
8th Floor

**CITY, STATE, and ZIP CODE**

Washington DC 20036

**2. IDENTIFICATION NUMBER**

C00431205

**ALLOCATION BY STATE**

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	3000.00	Nebraska	0.00	296992.59
Alaska	0.00	1000.00	Nevada	38894.11	114523.09
Arizona	0.00	0.00	New Hampshire	21477.44	723947.75
Arkansas	0.00	2500.00	New Jersey	1500.00	3610.97
California	33472.22	41560.72	New Mexico	0.00	1500.00
Colorado	0.00	9651.07	New York	0.00	93499.94
Connecticut	0.00	11.00	North Carolina	0.00	179760.76
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	33166.32	82751.68	Ohio	107.76	3409.06
Florida	350.85	6855.63	Oklahoma	5756.20	5791.34
Georgia	0.00	216835.99	Oregon	0.00	26345.30
Hawaii	56.07	56.07	Pennsylvania	0.00	3453.89
Idaho	0.00	3.85	Rhode Island	0.00	0.00
Illinois	0.00	280512.40	South Carolina	63898.95	1307218.05
Indiana	0.00	664.26	South Dakota	0.00	7152.54
Iowa	352936.68	1452913.17	Tennessee	9919.34	32789.49
Kansas	0.00	0.00	Texas	0.00	17114.07
Kentucky	0.00	1179.92	Utah	0.00	500.00
Louisiana	12740.71	14077.40	Vermont	0.00	26238.64
Maine	0.00	45048.54	Virginia	0.00	60124.97
Maryland	0.00	16921.56	Washington	1963.75	3275.67
Massachusetts	689113.76	1443456.92	West Virginia	0.00	4272.59
Michigan	0.00	83.56	Wisconsin	0.00	775.08
Minnesota	4143.71	105742.53	Wyoming	0.00	0.00
Mississippi	0.00	1400.00	Puerto Rico	0.00	0.00
Missouri	12694.20	61192.18	Guam	0.00	0.00
Montana	0.00	2328.62	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>1282192.07</b>	<b>6702042.86</b>

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 4 / 774

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Linda Dolmatch</p> <p>Mailing Address 152 State ST. #1</p> <p>City State Zip Code Newburyport MA 01950</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Monitor Group Occupation Instructional Designer</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 150.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 8</p> <p>Amount of Each Receipt this Period -2300.00</p> <p>Credit Card Chargeback</p> <p>Transaction ID: CC355540</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Linda Dolmatch</p> <p>Mailing Address 152 State ST. #1</p> <p>City State Zip Code Newburyport MA 01950</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Monitor Group Occupation Instructional Designer</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 150.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 8</p> <p>Amount of Each Receipt this Period -2200.00</p> <p>Credit Card Chargeback</p> <p>Transaction ID: CC290380</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Lawrence Hilton</p> <p>Mailing Address 7595 SW 80th PI PO Box 490</p> <p>City State Zip Code Sherwood OR 97140-0490</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Self employed Occupation Real Estate Broker</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 275.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 8</p> <p>Amount of Each Receipt this Period -25.00</p> <p>Credit Card Chargeback</p> <p>Transaction ID: CC326959</p>

**SUBTOTAL** of Receipts This Page (optional) .....

-4525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Judson Jones</p> <p>Mailing Address 810 Innovation Dr</p> <p>City State Zip Code Knoxville TN 37932-2562</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Siemens Molecular Imaging</p> <p>Occupation Scientist</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 302.02</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 8</p> <p>Amount of Each Receipt this Period -100.00</p> <p>Credit Card Chargeback</p> <p>Transaction ID: CC341779</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Lana L Maupin</p> <p>Mailing Address 1182 SE Haig St</p> <p>City State Zip Code Portland OR 97202-2722</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer kaiser permanente</p> <p>Occupation Secretary</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 285.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Transaction ID: 359435</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Barbara Merrifield</p> <p>Mailing Address 4202 36th Ave W</p> <p>City State Zip Code Seattle WA 98199-1325</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Farmers Insurance</p> <p>Occupation Manager</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Transaction ID: 359418</p>

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Stephen P Rifkind</p> <p>Mailing Address PO Box 30362</p> <p>City State Zip Code Santa Barbara CA 93130-0362</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Self employed</p> <p>Occupation Attorney</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Transaction ID: 359600</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Stephen P Rifkind</p> <p>Mailing Address PO Box 30362</p> <p>City State Zip Code Santa Barbara CA 93130-0362</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Self employed</p> <p>Occupation Attorney</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Transaction ID: 359599</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Unitemized Donors</p> <p>Mailing Address 410 Market Street S400</p> <p>City State Zip Code Chapel Hill NC 27516</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Unitemized Contributions</p> <p>Occupation Unitemized Contributions</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ -9876.15</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 8</p> <p>Amount of Each Receipt this Period -9876.15</p> <p>Transaction ID: 999999</p>

**SUBTOTAL** of Receipts This Page (optional) .....

-8876.15

**TOTAL** This Period (last page this line number only) .....

-13301.15

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 774

(check only one)

☒ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Department of the Treasury Federal Election Commission

Mailing Address

999 E Street

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7404068.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

1112253.40

Federal Matching Funds

Transaction ID: SA16-13985

**B.**

Full Name (Last, First, Middle Initial)

Department of the Treasury Federal Election Commission

Mailing Address

999 E Street

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7404068.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 8

Amount of Each Receipt this Period

1101700.04

Federal Matching Funds

Transaction ID: SA16-13986

**C.**

Full Name (Last, First, Middle Initial)

Department of the Treasury Federal Election Commission

Mailing Address

999 E Street

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7404068.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

1067843.06

Federal Matching Funds

Transaction ID: SA16-13987

**SUBTOTAL** of Receipts This Page (optional) .....

3281796.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 774

<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Department of the Treasury Federal Election Commission

Mailing Address

999 E Street

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

7404068.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	8

Amount of Each Receipt this Period

1062672.76

Federal Matching Funds

Transaction ID: SA16-13988

**SUBTOTAL** of Receipts This Page (optional) .....

1062672.76

**TOTAL** This Period (last page this line number only) .....

4344469.26



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address Fayetteville Street Mall City State Zip Code Raleigh NC 27606 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5501.37	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 8
	Amount of Each Receipt this Period 1220.67
	Interest
	Transaction ID: SA21-13996
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address Fayetteville Street Mall City State Zip Code Raleigh NC 27606 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5501.37	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 8
	Amount of Each Receipt this Period 1538.72
	Interest
	Transaction ID: SA21-13993
<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address Fayetteville Street Mall City State Zip Code Raleigh NC 27606 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5501.37	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 8
	Amount of Each Receipt this Period 1232.74
	Interest
	Transaction ID: SA21-13994

**SUBTOTAL** of Receipts This Page (optional) .....

**3992.13**

**TOTAL** This Period (last page this line number only) .....

**3992.13**

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

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PAGE 10 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David Shott

Mailing Address  
3215 McKinley Street

City State Zip Code  
Washington DC 20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13773.38

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

260.94

Press Travel Reimbursement

Transaction ID: SA20A-13797

**B.**

Full Name (Last, First, Middle Initial)  
James McGlinchy

Mailing Address  
524 W 57th St.

City State Zip Code  
New York NY 10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5623.14

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

416.62

Press Travel Reimbursement

Transaction ID: SA20A-13798

**C.**

Full Name (Last, First, Middle Initial)  
Charles Reid

Mailing Address  
202 M St.

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.68

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

209.02

Press Travel Reimbursement

Transaction ID: SA20A-13799

**SUBTOTAL** of Receipts This Page (optional) .....

886.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Aaron Lewis Mailing Address 4501 Connecticut Ave, NW City State Zip Code Washington DC 20008 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6352.09	Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8 Amount of Each Receipt this Period 297.37 Press Travel Reimbursement Transaction ID: SA20A-13800
<b>B.</b> Full Name (Last, First, Middle Initial) Sandy Johnson Mailing Address 1100 13th St. NW, Suite 700 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3691.37	Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8 Amount of Each Receipt this Period 88.35 Press Travel Reimbursement Transaction ID: SA20A-13801
<b>C.</b> Full Name (Last, First, Middle Initial) Raelyn Johnson Mailing Address 322 East 61st St. Apt. D City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6346.98	Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 8 Amount of Each Receipt this Period 260.94 Press Travel Reimbursement Transaction ID: SA20A-13802

**SUBTOTAL** of Receipts This Page (optional) .....

646.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

James Romoser

Mailing Address

2503 Avent Ferry Rd., Apt A

City

Raleigh

State

NC

Zip Code

27606

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

123.96

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

123.96

Press Travel Reimbursement

Transaction ID: SA20A-13803

**B.**

Full Name (Last, First, Middle Initial)

Julie Bosman

Mailing Address

620 8th Ave.

City

New York

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

157.98

Press Travel Reimbursement

Transaction ID: SA20A-13804

**C.**

Full Name (Last, First, Middle Initial)

Jason Horowitz

Mailing Address

915 Broadway

City

New York

State

NY

Zip Code

10015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

106.36

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

106.36

Press Travel Reimbursement

Transaction ID: SA20A-13805

**SUBTOTAL** of Receipts This Page (optional) .....

388.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Michelle Molloy

Mailing Address

251 W. 57th St.

15th Floor Photo Dept.

City

State

Zip Code

New York

NY

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1258.58

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

207.60

Press Travel Reimbursement

Transaction ID: SA20A-13806

**B.**

Full Name (Last, First, Middle Initial)

Arian Campo-Flores

Mailing Address

100 N. Biscayne Blvd.

Suite 1405

City

State

Zip Code

Miami

FL

33132

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.60

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

207.60

Press Travel Reimbursement

Transaction ID: SA20A-13807

**C.**

Full Name (Last, First, Middle Initial)

Jared, LLC

Mailing Address

70 Whipple Hill Road

City

State

Zip Code

Richmond

NH

03470-4504

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

930.00

Refund

Transaction ID: SA20A-13783

**SUBTOTAL** of Receipts This Page (optional) .....

1345.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Embarq Communications Kansas City

Mailing Address

PO Box 219100

City

Kansas City

State

MO

Zip Code

64121

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

478.71

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

472.61

Refund

Transaction ID: SA20A-13784

**B.**

Full Name (Last, First, Middle Initial)

Cox Communications, Inc.

Mailing Address

750 N Rancho Drive

City

Las Vegas

State

NV

Zip Code

89106

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

117.65

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

117.65

Refund

Transaction ID: SA20A-13785

**C.**

Full Name (Last, First, Middle Initial)

H. Robert Christensen

Mailing Address

215 S. McDowell Street

City

Raleigh

State

NC

Zip Code

7601

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

116.40

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

88.35

Press Travel Reimbursement

Transaction ID: SA20A-13808

**SUBTOTAL** of Receipts This Page (optional) .....

678.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Christopher Cooper

Mailing Address

1217 C Street, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2091.88

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

24.69

Press Travel Reimbursement

Transaction ID: SA20A-13809

**B.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

155.02

Press Travel Reimbursement

Transaction ID: SA20A-13810

**C.**

Full Name (Last, First, Middle Initial)

Michael Gordon

Mailing Address

1627 Eye Street NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

34.26

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

34.26

Press Travel Reimbursement

Transaction ID: SA20A-13811

**SUBTOTAL** of Receipts This Page (optional) .....

213.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Julie Bosman

Mailing Address  
620 8th Ave.

City State Zip Code  
New York NY 10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

834.86

Press Travel Reimbursement

Transaction ID: SA20A-13812

**B.**

Full Name (Last, First, Middle Initial)  
Josephine Hearn

Mailing Address  
2112 New Hampshire Ave.

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2331.28

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

329.91

Press Travel Reimbursement

Transaction ID: SA20A-13813

**C.**

Full Name (Last, First, Middle Initial)  
James McGlinchy

Mailing Address  
524 W 57th St.

City State Zip Code  
New York NY 10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5623.14

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

409.03

Press Travel Reimbursement

Transaction ID: SA20A-13814

**SUBTOTAL** of Receipts This Page (optional) .....

1573.80

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Michelle Molloy

Mailing Address

251 W. 57th St.

15th Floor Photo Dept.

City

State

Zip Code

New York

NY

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1258.58

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

88.71

Press Travel Reimbursement

Transaction ID: SA20A-13815

**B.**

Full Name (Last, First, Middle Initial)

Matthew Philips

Mailing Address

251 W. 57th St.

City

State

Zip Code

New York

NY

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3278.66

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

333.99

Press Travel Reimbursement

Transaction ID: SA20A-13816

**C.**

Full Name (Last, First, Middle Initial)

Nicholas Johnston

Mailing Address

1399 New York Ave NW

11th Floor

City

State

Zip Code

Washington

DC

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3174.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

765.13

Press Travel Reimbursement

Transaction ID: SA20A-13817

**SUBTOTAL** of Receipts This Page (optional) .....

1187.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Raelyn Johnson

Mailing Address

322 East 61st St. Apt. D

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6346.98

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

634.38

Press Travel Reimbursement

Transaction ID: SA20A-13818

**B.**

Full Name (Last, First, Middle Initial)

Seema Mehta

Mailing Address

2474 Magnolia Ave.

City

Long Beach

State

CA

Zip Code

90806

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3650.97

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

69.73

Press Travel Reimbursement

Transaction ID: SA20A-13819

**C.**

Full Name (Last, First, Middle Initial)

Stephanie Winkler

Mailing Address

2120 16th Ave NW, #607

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18.98

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

18.98

Press Travel Reimbursement

Transaction ID: SA20A-13820

**SUBTOTAL** of Receipts This Page (optional) .....

723.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

James McGlinchy

Mailing Address

524 W 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5623.14

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

229.44

Press Travel Reimbursement

Transaction ID: SA20A-13821

**B.**

Full Name (Last, First, Middle Initial)

Charles Reid

Mailing Address

202 M St.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.68

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

240.83

Press Travel Reimbursement

Transaction ID: SA20A-13822

**C.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

84.31

Press Travel Reimbursement

Transaction ID: SA20A-13823

**SUBTOTAL** of Receipts This Page (optional) .....

554.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Seema Mehta

Mailing Address

2474 Magnolia Ave.

City

Long Beach

State

CA

Zip Code

90806

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3650.97

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

140.84

Press Travel Reimbursement

Transaction ID: SA20A-13824

**B.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

91.61

Press Travel Reimbursement

Transaction ID: SA20A-14015

**C.**

Full Name (Last, First, Middle Initial)

Charles Reid

Mailing Address

202 M St.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.68

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

28.42

Press Travel Reimbursement

Transaction ID: SA20A-14016

**SUBTOTAL** of Receipts This Page (optional) .....

260.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) David Shott</p> <p>Mailing Address 3215 McKinley Street</p> <p>City State Zip Code Washington DC 20015</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 13773.38</p>	<p>Date of Receipt            M M / D D / Y Y Y Y Y            0 3 / 0 6 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 91.61</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-14017</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) H. Robert Christensen</p> <p>Mailing Address 215 S. McDowell Street</p> <p>City State Zip Code Raleigh NC 7601</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 116.40</p>	<p>Date of Receipt            M M / D D / Y Y Y Y Y            0 3 / 0 6 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 28.05</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-14018</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) James McGlinchy</p> <p>Mailing Address 524 W 57th St.</p> <p>City State Zip Code New York NY 10019</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 5623.14</p>	<p>Date of Receipt            M M / D D / Y Y Y Y Y            0 3 / 0 6 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 28.42</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-14019</p>

**SUBTOTAL** of Receipts This Page (optional) .....

148.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Julie Bosman

Mailing Address

620 8th Ave.

City

New York

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

91.61

Press Travel Reimbursement

Transaction ID: SA20A-14020

**B.**

Full Name (Last, First, Middle Initial)

Raelyn Johnson

Mailing Address

322 East 61st St. Apt. D

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6346.98

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

168.89

Press Travel Reimbursement

Transaction ID: SA20A-14021

**C.**

Full Name (Last, First, Middle Initial)

Charles Reid

Mailing Address

202 M St.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.68

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

257.04

Press Travel Reimbursement

Transaction ID: SA20A-13825

**SUBTOTAL** of Receipts This Page (optional) .....

517.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Charles Reid

Mailing Address

202 M St.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.68

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

409.03

Press Travel Reimbursement

Transaction ID: SA20A-13826

**B.**

Full Name (Last, First, Middle Initial)

ADP

Mailing Address

4101 Doie Cope Road

Suite 110

City

Raleigh

State

NC

Zip Code

27613

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6982.67

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

8.00

Payroll Taxes

Transaction ID: SA20A-14014

**C.**

Full Name (Last, First, Middle Initial)

Matthew Philips

Mailing Address

251 W. 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3278.66

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1109.25

Press Travel Reimbursement

Transaction ID: SA20A-13827

**SUBTOTAL** of Receipts This Page (optional) .....

1526.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Melinda Mara

Mailing Address

1150 15th St NW

5th Floor Photo

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

128.21

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

128.21

Press Travel Reimbursement

Transaction ID: SA20A-13828

**B.**

Full Name (Last, First, Middle Initial)

Jay Newton-Small

Mailing Address

1514 Corcoran St. NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1164.73

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

453.17

Press Travel Reimbursement

Transaction ID: SA20A-13829

**C.**

Full Name (Last, First, Middle Initial)

Eli Sanders

Mailing Address

1535 11th Ave., 3rd Floor

City

Seattle

State

WA

Zip Code

98122

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.17

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

275.17

Press Travel Reimbursement

Transaction ID: SA20A-13830

**SUBTOTAL** of Receipts This Page (optional) .....

856.55

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Robert Willett

Mailing Address

215 S. McDowell St.

City

Raleigh

State

NC

Zip Code

27601

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4093.33

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1279.61

Press Travel Reimbursement

Transaction ID: SA20A-13831

**B.**

Full Name (Last, First, Middle Initial)

Josephine Hearn

Mailing Address

2112 New Hampshire Ave.

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2331.28

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1289.81

Press Travel Reimbursement

Transaction ID: SA20A-13832

**C.**

Full Name (Last, First, Middle Initial)

Julie Bosman

Mailing Address

620 8th Ave.

City

New York

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1078.21

Press Travel Reimbursement

Transaction ID: SA20A-13833

**SUBTOTAL** of Receipts This Page (optional) .....

3647.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Johanna Piazza

Mailing Address

338 Tall Meadow Lane

City

State

Zip Code

Yardley

PA

19067

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.17

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

275.17

Press Travel Reimbursement

Transaction ID: SA20A-13834

**B.**

Full Name (Last, First, Middle Initial)

Michelle Molloy

Mailing Address

251 W. 57th St.

15th Floor Photo Dept.

City

State

Zip Code

New York

NY

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1258.58

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

836.64

Press Travel Reimbursement

Transaction ID: SA20A-13835

**C.**

Full Name (Last, First, Middle Initial)

Ellen McGuire

Mailing Address

4001 Nebraska Ave NW

City

State

Zip Code

Washington

DC

20016

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

128.21

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

128.21

Press Travel Reimbursement

Transaction ID: SA20A-13836

**SUBTOTAL** of Receipts This Page (optional) .....

1240.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ari Melber

Mailing Address

626 Stewart Ave, #1

City

Ithaca

State

NY

Zip Code

14850

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.17

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

275.17

Press Travel Reimbursement

Transaction ID: SA20A-13837

**B.**

Full Name (Last, First, Middle Initial)

Gina Ferazzi

Mailing Address

3429 Elmwood Dr.

City

Riverside

State

CA

Zip Code

92506

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

146.96

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

146.96

Press Travel Reimbursement

Transaction ID: SA20A-13838

**C.**

Full Name (Last, First, Middle Initial)

Seema Mehta

Mailing Address

2474 Magnolia Ave.

City

Long Beach

State

CA

Zip Code

90806

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3650.97

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

146.96

Press Travel Reimbursement

Transaction ID: SA20A-13839

**SUBTOTAL** of Receipts This Page (optional) .....

569.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

David Shott

Mailing Address

3215 McKinley Street

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13773.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1256.21

Press Travel Reimbursement

Transaction ID: SA20A-13840

**B.**

Full Name (Last, First, Middle Initial)

Steve Pope

Mailing Address

1249 71st St.

City

Des Moines

State

IA

Zip Code

50311

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

306.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

306.21

Press Travel Reimbursement

Transaction ID: SA20A-13841

**C.**

Full Name (Last, First, Middle Initial)

Jim Morrill

Mailing Address

600 S. Tyron St.

City

Charlotte

State

NC

Zip Code

28204

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1652.24

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1652.24

Press Travel Reimbursement

Transaction ID: SA20A-13842

**SUBTOTAL** of Receipts This Page (optional) .....

3214.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

James McGlinchy

Mailing Address

524 W 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5623.14

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

453.17

Press Travel Reimbursement

Transaction ID: SA20A-13843

**B.**

Full Name (Last, First, Middle Initial)

Charles Reid

Mailing Address

202 M St.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

453.17

Press Travel Reimbursement

Transaction ID: SA20A-13844

**C.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

453.17

Press Travel Reimbursement

Transaction ID: SA20A-13845

**SUBTOTAL** of Receipts This Page (optional) .....

1359.51

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Nicholas Johnston

Mailing Address

1399 New York Ave NW

11th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3174.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1256.21

Press Travel Reimbursement

Transaction ID: SA20A-13846

**B.**

Full Name (Last, First, Middle Initial)

Sandy Johnson

Mailing Address

1100 13th St. NW, Suite 700

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3691.37

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1421.73

Press Travel Reimbursement

Transaction ID: SA20A-13847

**C.**

Full Name (Last, First, Middle Initial)

Raelyn Johnson

Mailing Address

322 East 61st St. Apt. D

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6346.98

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

1088.21

Press Travel Reimbursement

Transaction ID: SA20A-13848

**SUBTOTAL** of Receipts This Page (optional) .....

3766.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Robert Willett

Mailing Address

215 S. McDowell St.

City

Raleigh

State

NC

Zip Code

27601

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4093.33

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

670.24

Press Travel Reimbursement

Transaction ID: SA20A-13849

**B.**

Full Name (Last, First, Middle Initial)

Sasha Issenberg

Mailing Address

1708 Pine St., Apt 3F

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18.98

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

18.98

Press Travel Reimbursement

Transaction ID: SA20A-13850

**C.**

Full Name (Last, First, Middle Initial)

Larry Rubenstein

Mailing Address

1333 H St., Suite 500

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2644.94

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

988.53

Press Travel Reimbursement

Transaction ID: SA20A-13851

**SUBTOTAL** of Receipts This Page (optional) .....

1677.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Sandy Johnson

Mailing Address

1100 13th St. NW, Suite 700

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3691.37

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13883

**B.**

Full Name (Last, First, Middle Initial)

Daniel Balz

Mailing Address

7816 Glenbrook Rd.

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

711.56

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13884

**C.**

Full Name (Last, First, Middle Initial)

Larry Rubenstein

Mailing Address

1333 H St., Suite 500

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2644.94

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13885

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Stewart

Mailing Address

1230 Park Ave., Apt 3E

City

New York

State

NY

Zip Code

10125

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

711.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13886

**B.**

Full Name (Last, First, Middle Initial)

Christopher Cooper

Mailing Address

1217 C Street, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2091.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13887

**C.**

Full Name (Last, First, Middle Initial)

David Shott

Mailing Address

3215 McKinley Street

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13773.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13888

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Anthony DeMarco

Mailing Address  
30 Rockefeller Plaza

City State Zip Code  
New York NY 10112

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3113.06

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13889

**B.**

Full Name (Last, First, Middle Initial)  
Lauren Kornreich

Mailing Address  
820 First St. NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13890

**C.**

Full Name (Last, First, Middle Initial)  
Maureen Dowd

Mailing Address  
3260 N St. NW

City State Zip Code  
Washington DC 20007

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1423.12

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13891

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Melissa Dunlop

Mailing Address

30 Rockefeller Plaza

City

New York

State

NY

Zip Code

10012

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

711.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13892

**B.**

Full Name (Last, First, Middle Initial)

Josephine Hearn

Mailing Address

2112 New Hampshire Ave.

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2331.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13893

**C.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13894

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Bill Kalis

Mailing Address

1271 6th Ave. 23rd Floor, Photo Dept.

City

State

Zip Code

New York

NY

10020

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1940.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13895

**B.**

Full Name (Last, First, Middle Initial)

Raelyn Johnson

Mailing Address

322 East 61st St. Apt. D

City

State

Zip Code

New York

NY

10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6346.98

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13896

**C.**

Full Name (Last, First, Middle Initial)

Nicholas Johnston

Mailing Address

1399 New York Ave NW 11th Floor

City

State

Zip Code

Washington

DC

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3174.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13897

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Anthony DeMarco

Mailing Address

30 Rockefeller Plaza

City

New York

State

NY

Zip Code

10112

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3113.06

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13898

**B.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13899

**C.**

Full Name (Last, First, Middle Initial)

Cleve Massey

Mailing Address

PO Box 670768

City

Dallas

State

TX

Zip Code

75367

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

711.56

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13900

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) James McGlinchy	Date of Receipt
Mailing Address 524 W 57th St.	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 3 / 1 2 / 2 0 0 8</div> </div>
City State Zip Code New York NY 10019	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 711.56
Name of Employer Occupation	Press Travel Reimbursement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5623.14
<b>Transaction ID: SA20A-13901</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) Seema Mehta	Date of Receipt
Mailing Address 2474 Magnolia Ave.	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 3 / 1 2 / 2 0 0 8</div> </div>
City State Zip Code Long Beach CA 90806	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 711.56
Name of Employer Occupation	Press Travel Reimbursement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3650.97
<b>Transaction ID: SA20A-13902</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) Jay Newton-Small	Date of Receipt
Mailing Address 1514 Corcoran St. NW	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 3 / 1 2 / 2 0 0 8</div> </div>
City State Zip Code Washington DC 20009	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 711.56
Name of Employer Occupation	Press Travel Reimbursement
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1164.73
<b>Transaction ID: SA20A-13903</b>	

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 774

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Maureen Dowd

Mailing Address

3260 N St. NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1423.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13904

B.

Full Name (Last, First, Middle Initial)

Matthew Philips

Mailing Address

251 W. 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3278.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13905

C.

Full Name (Last, First, Middle Initial)

Anthony DeMarco

Mailing Address

30 Rockefeller Plaza

City

New York

State

NY

Zip Code

10112

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3113.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13906

SUBTOTAL of Receipts This Page (optional) .....

2134.68

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Robert Stacey

Mailing Address

5932 St. Agnes

City

Plano

State

TX

Zip Code

75093

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

711.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13907

**B.**

Full Name (Last, First, Middle Initial)

Audrey Taylor

Mailing Address

9910 Renfrew Rd.

City

Silver Spring

State

MD

Zip Code

20901

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2520.36

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13908

**C.**

Full Name (Last, First, Middle Initial)

Anthony DeMarco

Mailing Address

30 Rockefeller Plaza

City

New York

State

NY

Zip Code

10112

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3113.06

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13909

**SUBTOTAL** of Receipts This Page (optional) .....

2134.68

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13910

**B.**

Full Name (Last, First, Middle Initial)

Robert Willett

Mailing Address

215 S. McDowell St.

City

Raleigh

State

NC

Zip Code

27601

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4093.33

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

711.56

Press Travel Reimbursement

Transaction ID: SA20A-13911

**C.**

Full Name (Last, First, Middle Initial)

Julie Bosman

Mailing Address

620 8th Ave.

City

New York

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

1408.77

Press Travel Reimbursement

Transaction ID: SA20A-13912

**SUBTOTAL** of Receipts This Page (optional) .....

2831.89

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David Shott

Mailing Address  
3215 McKinley Street

City State Zip Code  
Washington DC 20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13773.38

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

1408.77

Press Travel Reimbursement

Transaction ID: SA20A-13913

**B.**

Full Name (Last, First, Middle Initial)  
Lauren Kornreich

Mailing Address  
820 First St. NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

1408.77

Press Travel Reimbursement

Transaction ID: SA20A-13914

**C.**

Full Name (Last, First, Middle Initial)  
Raelyn Johnson

Mailing Address  
322 East 61st St. Apt. D

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6346.98

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

1408.77

Press Travel Reimbursement

Transaction ID: SA20A-13915

**SUBTOTAL** of Receipts This Page (optional) .....

4226.31

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

1408.77

Press Travel Reimbursement

Transaction ID: SA20A-13916

**B.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

1408.77

Press Travel Reimbursement

Transaction ID: SA20A-13917

**C.**

Full Name (Last, First, Middle Initial)

James McGlinchy

Mailing Address

524 W 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5623.14

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 8

Amount of Each Receipt this Period

1408.77

Press Travel Reimbursement

Transaction ID: SA20A-13918

**SUBTOTAL** of Receipts This Page (optional) .....

4226.31

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Seema Mehta</p> <p>Mailing Address 2474 Magnolia Ave.</p> <p>City State Zip Code Long Beach CA 90806</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 3650.97</p>	<p>Date of Receipt  M M / D D / Y Y Y Y  0 3 / 1 2 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 1408.77</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-13919</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Gabriel Stix</p> <p>Mailing Address 18240 Windsor Hill Dr.</p> <p>City State Zip Code Olney MD 20832</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 2817.54</p>	<p>Date of Receipt  M M / D D / Y Y Y Y  0 3 / 1 2 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 1408.77</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-13920</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) J. David Ake</p> <p>Mailing Address 450 W. 33rd St.</p> <p>City State Zip Code New York NY 10001</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 1408.77</p>	<p>Date of Receipt  M M / D D / Y Y Y Y  0 3 / 1 2 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 1408.77</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-13921</p>

**SUBTOTAL** of Receipts This Page (optional) .....

4226.31

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Gabriel Stix</p> <p>Mailing Address 18240 Windsor Hill Dr.</p> <p>City State Zip Code Olney MD 20832</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 2817.54</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  0 3 / 1 2 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 1408.77</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-13922</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Margaret Nimkoff</p> <p>Mailing Address 916 Edgewater Circle</p> <p>City State Zip Code Chapel Hill NC 27516</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 60.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  0 3 / 1 4 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 60.00</p> <p>Equipment Purchase</p> <p>Transaction ID: SA20A-13787</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Aquila</p> <p>Mailing Address PO Box 4649</p> <p>City State Zip Code Carol Stream IL 60197-4649</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Election Cycle-to-Date ▼ 5.20</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  0 3 / 1 4 / 2 0 0 8         </p> <p>Amount of Each Receipt this Period 5.20</p> <p>Refund</p> <p>Transaction ID: SA20A-13788</p>

**SUBTOTAL** of Receipts This Page (optional) .....

1473.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

CobraServ Natl. Service Center

Mailing Address

3201 34th Street South

City

St. Petersburg

State

FL

Zip Code

33711-3828

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1856.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

813.05

Refund

Transaction ID: SA20A-13789

**B.**

Full Name (Last, First, Middle Initial)

CobraServ Natl. Service Center

Mailing Address

3201 34th Street South

City

St. Petersburg

State

FL

Zip Code

33711-3828

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1856.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

1043.27

Refund

Transaction ID: SA20A-13791

**C.**

Full Name (Last, First, Middle Initial)

RRCO

Mailing Address

2760 Main Street

PO Box 826

City

North Conway

State

NH

Zip Code

03860

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

813.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

813.05

Refund

Transaction ID: SA20A-13792

**SUBTOTAL** of Receipts This Page (optional) .....

2669.37

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Time Warner- Chelsea	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 8
Mailing Address PO Box 9148	
City State Zip Code Chelsea MA 02150-9148	Amount of Each Receipt this Period 152.91
FEC ID number of contributing federal political committee.	
Name of Employer Occupation	Refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 220.87
<b>Transaction ID: SA20A-13793</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) Time Warner- Chelsea	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 8
Mailing Address PO Box 9148	
City State Zip Code Chelsea MA 02150-9148	Amount of Each Receipt this Period 67.96
FEC ID number of contributing federal political committee.	
Name of Employer Occupation	Refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 220.87
<b>Transaction ID: SA20A-13794</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) Embarq Communications Kansas City	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 8
Mailing Address PO Box 219100	
City State Zip Code Kansas City MO 64121	Amount of Each Receipt this Period 6.10
FEC ID number of contributing federal political committee.	
Name of Employer Occupation	Refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 478.71
<b>Transaction ID: SA20A-13795</b>	

**SUBTOTAL** of Receipts This Page (optional) .....

226.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Pamela Garland

Mailing Address

8210 West Market St.

City

Greensboro

State

NC

Zip Code

27409

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

300.00

Equipment Purchase

Transaction ID: SA20A-13796

**B.**

Full Name (Last, First, Middle Initial)

Christopher Cooper

Mailing Address

1217 C Street, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2091.88

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1355.63

Press Travel Reimbursement

Transaction ID: SA20A-13852

**C.**

Full Name (Last, First, Middle Initial)

Julie Bosman

Mailing Address

620 8th Ave.

City

New York

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

2258.94

Press Travel Reimbursement

Transaction ID: SA20A-13853

**SUBTOTAL** of Receipts This Page (optional) .....

3914.57

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Bill Kalis

Mailing Address

1271 6th Ave. 23rd Floor, Photo Dept.

City

State

Zip Code

New York

NY

10020

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1940.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

441.37

Press Travel Reimbursement

Transaction ID: SA20A-13854

**B.**

Full Name (Last, First, Middle Initial)

Larry Rubenstein

Mailing Address

1333 H St., Suite 500

City

State

Zip Code

Washington

DC

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2644.94

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

487.25

Press Travel Reimbursement

Transaction ID: SA20A-13855

**C.**

Full Name (Last, First, Middle Initial)

Larry Rubenstein

Mailing Address

1333 H St., Suite 500

City

State

Zip Code

Washington

DC

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2644.94

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

209.60

Press Travel Reimbursement

Transaction ID: SA20A-13856

**SUBTOTAL** of Receipts This Page (optional) .....

1138.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christopher Hayes</p> <p>Mailing Address 33 Irving Place, 8th Floor</p> <p>City State Zip Code Washington DC 20009</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         Election Cycle-to-Date ▼       </p>	<p>Date of Receipt          M M / D D / Y Y Y Y          0 3 / 1 7 / 2 0 0 8       </p> <p>Amount of Each Receipt this Period 509.00</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-13857</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matthew Philips</p> <p>Mailing Address 251 W. 57th St.</p> <p>City State Zip Code New York NY 10019</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         Election Cycle-to-Date ▼       </p>	<p>Date of Receipt          M M / D D / Y Y Y Y          0 3 / 1 7 / 2 0 0 8       </p> <p>Amount of Each Receipt this Period 1123.86</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-13858</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Seema Mehta</p> <p>Mailing Address 2474 Magnolia Ave.</p> <p>City State Zip Code Long Beach CA 90806</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         Election Cycle-to-Date ▼       </p>	<p>Date of Receipt          M M / D D / Y Y Y Y          0 3 / 1 7 / 2 0 0 8       </p> <p>Amount of Each Receipt this Period 1173.11</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A-13859</p>

**SUBTOTAL** of Receipts This Page (optional) .....

**2805.97**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

David Shott

Mailing Address

3215 McKinley Street

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13773.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

2490.71

Press Travel Reimbursement

Transaction ID: SA20A-13860

**B.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1173.11

Press Travel Reimbursement

Transaction ID: SA20A-13861

**C.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

231.77

Press Travel Reimbursement

Transaction ID: SA20A-13862

**SUBTOTAL** of Receipts This Page (optional) .....

3895.59

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 774

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Lauren Kornreich Mailing Address 820 First St. NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 36615.02	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 7 / 2 0 0 8 Amount of Each Receipt this Period 231.77 Press Travel Reimbursement Transaction ID: SA20A-13863
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Johnson Mailing Address 19 W. Hargett St., Suite 300 City State Zip Code Raleigh NC 27601 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 509.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 7 / 2 0 0 8 Amount of Each Receipt this Period 509.00 Press Travel Reimbursement Transaction ID: SA20A-13864
<b>C.</b> Full Name (Last, First, Middle Initial) Sandy Johnson Mailing Address 1100 13th St. NW, Suite 700 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3691.37	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 7 / 2 0 0 8 Amount of Each Receipt this Period 487.25 Press Travel Reimbursement Transaction ID: SA20A-13865

**SUBTOTAL** of Receipts This Page (optional) .....

1228.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 774

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

941.34

Press Travel Reimbursement

Transaction ID: SA20A-13998

**B.**

Full Name (Last, First, Middle Initial)

Audrey Taylor

Mailing Address

9910 Renfrew Rd.

City

Silver Spring

State

MD

Zip Code

20901

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2520.36

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

453.17

Press Travel Reimbursement

Transaction ID: SA20A-13999

**C.**

Full Name (Last, First, Middle Initial)

Audrey Taylor

Mailing Address

9910 Renfrew Rd.

City

Silver Spring

State

MD

Zip Code

20901

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2520.36

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1355.63

Press Travel Reimbursement

Transaction ID: SA20A-14000

**SUBTOTAL** of Receipts This Page (optional) .....

2750.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Charles Reid

Mailing Address

202 M St.

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.68

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

432.34

Press Travel Reimbursement

Transaction ID: SA20A-14001

**B.**

Full Name (Last, First, Middle Initial)

Jacob Beam

Mailing Address

100 Bullough Park

City

Newton

State

MA

Zip Code

02456

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.17

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

275.17

Press Travel Reimbursement

Transaction ID: SA20A-14002

**C.**

Full Name (Last, First, Middle Initial)

James McGlinchy

Mailing Address

524 W 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5623.14

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

432.34

Press Travel Reimbursement

Transaction ID: SA20A-14003

**SUBTOTAL** of Receipts This Page (optional) .....

1139.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Nicholas Johnston

Mailing Address

1399 New York Ave NW

11th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3174.27

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

441.37

Press Travel Reimbursement

Transaction ID: SA20A-14004

**B.**

Full Name (Last, First, Middle Initial)

Raelyn Johnson

Mailing Address

322 East 61st St. Apt. D

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6346.98

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1173.11

Press Travel Reimbursement

Transaction ID: SA20A-14005

**C.**

Full Name (Last, First, Middle Initial)

Sandy Johnson

Mailing Address

1100 13th St. NW, Suite 700

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3691.37

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

911.58

Press Travel Reimbursement

Transaction ID: SA20A-14006

**SUBTOTAL** of Receipts This Page (optional) .....

2526.06

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Bill Kalis

Mailing Address  
1271 6th Ave. 23rd Floor, Photo Dept.

City State Zip Code  
New York NY 10020

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1940.09

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

333.99

Press Travel Reimbursement

Transaction ID: SA20A-14007

**B.**

Full Name (Last, First, Middle Initial)  
Bill Kalis

Mailing Address  
1271 6th Ave. 23rd Floor, Photo Dept.

City State Zip Code  
New York NY 10020

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1940.09

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

453.17

Press Travel Reimbursement

Transaction ID: SA20A-14008

**C.**

Full Name (Last, First, Middle Initial)  
Robert Willett

Mailing Address  
215 S. McDowell St.

City State Zip Code  
Raleigh NC 27601

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4093.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

915.95

Press Travel Reimbursement

Transaction ID: SA20A-13866

**SUBTOTAL** of Receipts This Page (optional) .....

1703.11

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Larry Rubenstein

Mailing Address

1333 H St., Suite 500

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2644.94

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

248.00

Press Travel Reimbursement

Transaction ID: SA20A-13867

**B.**

Full Name (Last, First, Middle Initial)

Robert Willett

Mailing Address

215 S. McDowell St.

City

Raleigh

State

NC

Zip Code

27601

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4093.33

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

515.97

Press Travel Reimbursement

Transaction ID: SA20A-13868

**C.**

Full Name (Last, First, Middle Initial)

Jacob Silberberg

Mailing Address

288 South River Rd.

City

Bedford

State

NH

Zip Code

03110

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4581.22

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

605.26

Press Travel Reimbursement

Transaction ID: SA20A-13869

**SUBTOTAL** of Receipts This Page (optional) .....

1369.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Julie Bosman

Mailing Address

620 8th Ave.

City

New York

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

357.27

Press Travel Reimbursement

Transaction ID: SA20A-13870

**B.**

Full Name (Last, First, Middle Initial)

Ellis Cose

Mailing Address

251 W. 57th St.

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

73.65

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

73.65

Press Travel Reimbursement

Transaction ID: SA20A-13871

**C.**

Full Name (Last, First, Middle Initial)

David Shott

Mailing Address

3215 McKinley Street

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13773.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

503.22

Press Travel Reimbursement

Transaction ID: SA20A-13872

**SUBTOTAL** of Receipts This Page (optional) .....

934.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

605.26

Press Travel Reimbursement

Transaction ID: SA20A-13873

**B.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

605.26

Press Travel Reimbursement

Transaction ID: SA20A-13874

**C.**

Full Name (Last, First, Middle Initial)

Aaron Lewis

Mailing Address

4501 Connecticut Ave, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6352.09

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

503.22

Press Travel Reimbursement

Transaction ID: SA20A-13875

**SUBTOTAL** of Receipts This Page (optional) .....

1713.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Raelyn Johnson

Mailing Address  
322 East 61st St. Apt. D

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6346.98

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

605.26

Press Travel Reimbursement

Transaction ID: SA20A-13876

**B.**

Full Name (Last, First, Middle Initial)  
Lauren Kornreich

Mailing Address  
820 First St. NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

6973.77

Press Travel Reimbursement

Transaction ID: SA20A-13877

**C.**

Full Name (Last, First, Middle Initial)  
Lauren Kornreich

Mailing Address  
820 First St. NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

6973.77

Press Travel Reimbursement

Transaction ID: SA20A-13878

**SUBTOTAL** of Receipts This Page (optional) .....

14552.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Jacob Silberberg

Mailing Address

288 South River Rd.

City

Bedford

State

NH

Zip Code

03110

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4581.22

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

3055.41

Press Travel Reimbursement

Transaction ID: SA20A-13879

**B.**

Full Name (Last, First, Middle Initial)

Julie Bosman

Mailing Address

620 8th Ave.

City

New York

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13457.27

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

6973.77

Press Travel Reimbursement

Transaction ID: SA20A-13880

**C.**

Full Name (Last, First, Middle Initial)

David Shott

Mailing Address

3215 McKinley Street

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13773.38

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

6973.77

Press Travel Reimbursement

Transaction ID: SA20A-13881

**SUBTOTAL** of Receipts This Page (optional) .....

17002.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 774

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

920.55

Press Travel Reimbursement

Transaction ID: SA20A-14022

**B.**

Full Name (Last, First, Middle Initial)

Jacob Silberberg

Mailing Address

288 South River Rd.

City

Bedford

State

NH

Zip Code

03110

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4581.22

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

920.55

Press Travel Reimbursement

Transaction ID: SA20A-14023

**C.**

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

6973.77

Press Travel Reimbursement

Transaction ID: SA20A-14024

**SUBTOTAL** of Receipts This Page (optional) .....

8814.87

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3P)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 / 774

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Lauren Kornreich

Mailing Address

820 First St. NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Election Cycle-to-Date ▼

36615.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	0	8

Amount of Each Receipt this Period

6973.77

Press Travel Reimbursement

Transaction ID: SA20A-14025

SUBTOTAL of Receipts This Page (optional) .....

6973.77

TOTAL This Period (last page this line number only) .....

138539.03

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address Fayetteville Street Mall

City Raleigh State NC Zip Code 27606

Purpose of Disbursement

Bank Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-14026

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

1340.41

**B.**

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 915 South 500 East  
Suite 200

City American Fork State UT Zip Code 84003

Purpose of Disbursement

Bank Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-14027

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

135.40

**C.**

Full Name (Last, First, Middle Initial)

SV Center

Mailing Address 400 Market Street  
Suite 200

City Chapel Hill State NC Zip Code 27516

Purpose of Disbursement

Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11398

Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

14484.49

**SUBTOTAL** of Disbursements This Page (optional) .....

15960.30

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph Clarke	<b>Transaction ID:</b> SB23-11400 <b>Date of Disbursement</b>																				
Mailing Address 2615 Maple Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	6		2	0	0	8												
City State Zip Code Manhattan Beach CA 90266 Purpose of Disbursement Consulting/Internet Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Jet Aviation	<b>Transaction ID:</b> SB23-11401 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 510779	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	6		2	0	0	8												
City State Zip Code Philadelphia PA 19175 Purpose of Disbursement Airfare Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">32089.65</td> </tr> </table>	32089.65																			
32089.65																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) ADP	<b>Transaction ID:</b> SB23-14028 <b>Date of Disbursement</b>																				
Mailing Address 4101 Doie Cope Road Suite 110	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	0	8												
City State Zip Code Raleigh NC 27613 Purpose of Disbursement Payroll Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">43.00</td> </tr> </table>	43.00																			
43.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**32632.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23-14030 <b>Date of Disbursement</b>
Mailing Address Fayetteville Street Mall	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Raleigh State NC Zip Code 27606	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Charges	<div>286.55</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Gina Ferazzi	<b>Transaction ID:</b> SB23-13969 <b>Date of Disbursement</b>
Mailing Address 3429 Elmwood Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Riverside State CA Zip Code 92506	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Press Travel	<div>34.49</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Seema Mehta	<b>Transaction ID:</b> SB23-13970 <b>Date of Disbursement</b>
Mailing Address 2474 Magnolia Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Long Beach State CA Zip Code 90806	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Press Travel	<div>77.28</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**398.32**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ari Melber

Mailing Address 626 Stewart Ave, #1

City Ithaca State NY Zip Code 14850

Purpose of Disbursement  
Press Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-13973

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

235.17

**B.**

Full Name (Last, First, Middle Initial)

Steve Pope

Mailing Address 1249 71st St.

City Des Moines State IA Zip Code 50311

Purpose of Disbursement  
Press Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-13972

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

178.11

**C.**

Full Name (Last, First, Middle Initial)

Robert Willett

Mailing Address 215 S. McDowell St.

City Raleigh State NC Zip Code 27601

Purpose of Disbursement  
Press Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-13971

Date of Disbursement

03 / 11 / 2008

Amount of Each Disbursement this Period

275.48

**SUBTOTAL** of Disbursements This Page (optional) .....

688.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Morningstar of Carrboro	<b>Transaction ID:</b> SB23-11402 <b>Date of Disbursement</b>
Mailing Address 510 Jones Ferry Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Carrboro State NC Zip Code 27510	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Rent	<div>201.05</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Premium Financing Specialists	<b>Transaction ID:</b> SB23-11403 <b>Date of Disbursement</b>
Mailing Address PO Box 905131	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28290-5131	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Insurance	<div>8049.32</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Pitney Bowes Inc	<b>Transaction ID:</b> SB23-11404 <b>Date of Disbursement</b>
Mailing Address PO Box 856390	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Louisville State KY Zip Code 40285-6390	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Equipment Rental	<div>67.78</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>8318.15</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Purchase Power	<b>Transaction ID:</b> SB23-11405 <b>Date of Disbursement</b>
Mailing Address PO Box 856042	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Louisville State KY Zip Code 40285-6042	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Equipment Rental	<div> <div></div> <div>496.31</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) 1705 DeSales Street LLC	<b>Transaction ID:</b> SB23-11406 <b>Date of Disbursement</b>
Mailing Address 1705 DeSales Street, LLC	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Utilities	<div> <div></div> <div>62183.33</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ceridian Benefit Services	<b>Transaction ID:</b> SB23-11408 <b>Date of Disbursement</b>
Mailing Address P.O. Box 10989	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div>
City Newark State NJ Zip Code 07193	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Insurance	<div> <div></div> <div>226.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**62905.64**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Chapel Hill Moving Company

Mailing Address 155 Windsor Circle

City State Zip Code  
Chapel Hill NC 27516

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11409

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

820.00

**B.**

Full Name (Last, First, Middle Initial)

SV Center

Mailing Address 400 Market Street  
Suite 200

City State Zip Code  
Chapel Hill NC 27516

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11410

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

6553.56

**C.**

Full Name (Last, First, Middle Initial)

Truckin Movers Corporation

Mailing Address 1031 Harvest Street

City State Zip Code  
Durham NC 27704

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11411

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

3825.97

**SUBTOTAL** of Disbursements This Page (optional) .....

11199.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PDQ Printing</p> <p>Mailing Address 3820 South Valley View Blvd</p> <p>City Las Vegas State NV Zip Code 89103</p> <p>Purpose of Disbursement Printing/Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-11412</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 7969.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) PDQ Printing</p> <p>Mailing Address 3820 South Valley View Blvd</p> <p>City Las Vegas State NV Zip Code 89103</p> <p>Purpose of Disbursement Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-11413</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 40.78</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) PDQ Printing</p> <p>Mailing Address 3820 South Valley View Blvd</p> <p>City Las Vegas State NV Zip Code 89103</p> <p>Purpose of Disbursement Printing/Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-11414</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 357.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

8367.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
PDQ Printing

Mailing Address 3820 South Valley View Blvd

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement  
Printing/Copying

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-11415

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1390.00

**B.**

Full Name (Last, First, Middle Initial)  
PDQ Printing

Mailing Address 3820 South Valley View Blvd

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement  
Delivery

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-11416

Date of Disbursement

/   /

Amount of Each Disbursement this Period

198.69

**C.**

Full Name (Last, First, Middle Initial)  
PDQ Printing

Mailing Address 3820 South Valley View Blvd

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement  
Delivery

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-11417

Date of Disbursement

/   /

Amount of Each Disbursement this Period

265.62

**SUBTOTAL** of Disbursements This Page (optional) .....

1854.31

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) PDQ Printing	<b>Transaction ID:</b> SB23-11418 <b>Date of Disbursement</b>																				
Mailing Address 3820 South Valley View Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	3		2	0	0	8												
City Las Vegas State NV Zip Code 89103	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Printing/Copying	<table border="1"> <tr> <td colspan="10">685.40</td> </tr> </table>	685.40																			
685.40																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Public Service of NH	<b>Transaction ID:</b> SB23-11419 <b>Date of Disbursement</b>																				
Mailing Address PO Box 360	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	3		2	0	0	8												
City Manchester State NH Zip Code 03105-0360	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Utilities	<table border="1"> <tr> <td colspan="10">275.62</td> </tr> </table>	275.62																			
275.62																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Public Service of NH	<b>Transaction ID:</b> SB23-11420 <b>Date of Disbursement</b>																				
Mailing Address PO Box 360	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	3		2	0	0	8												
City Manchester State NH Zip Code 03105-0360	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Utilities	<table border="1"> <tr> <td colspan="10">147.49</td> </tr> </table>	147.49																			
147.49																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**1108.51**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11421

Date of Disbursement

/   /

Amount of Each Disbursement this Period

155.36

**B.**

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11422

Date of Disbursement

/   /

Amount of Each Disbursement this Period

230.18

**C.**

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11423

Date of Disbursement

/   /

Amount of Each Disbursement this Period

295.10

**SUBTOTAL** of Disbursements This Page (optional) .....

680.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11424

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

91.32

B.

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11425

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

104.31

C.

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11426

Date of Disbursement

03 / 13 / 2008

Amount of Each Disbursement this Period

120.90

SUBTOTAL of Disbursements This Page (optional) .....

316.53

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11427

Date of Disbursement

/   /

Amount of Each Disbursement this Period

178.09

**B.**

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11428

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.68

**C.**

Full Name (Last, First, Middle Initial)  
Public Service of NH

Mailing Address PO Box 360

City Manchester State NH Zip Code 03105-0360

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11429

Date of Disbursement

/   /

Amount of Each Disbursement this Period

18.44

**SUBTOTAL** of Disbursements This Page (optional) .....

322.21

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Public Service of NH	<b>Transaction ID:</b> SB23-11430 <b>Date of Disbursement</b>																				
Mailing Address PO Box 360	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	3		2	0	0	8												
City Manchester State NH Zip Code 03105-0360	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Utilities	<table border="1"> <tr> <td colspan="10">124.44</td> </tr> </table>	124.44																			
124.44																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Soundpath Conferencing	<b>Transaction ID:</b> SB23-11431 <b>Date of Disbursement</b>																				
Mailing Address PO Box 33667	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	3		2	0	0	8												
City Washington State DC Zip Code 20033-3667	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone	<table border="1"> <tr> <td colspan="10">17666.86</td> </tr> </table>	17666.86																			
17666.86																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) UPS- Philadelphia	<b>Transaction ID:</b> SB23-11432 <b>Date of Disbursement</b>																				
Mailing Address PO Box 7247-0244	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	3		2	0	0	8												
City Philadelphia State PA Zip Code 19170-0001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Delivery	<table border="1"> <tr> <td colspan="10">1.53</td> </tr> </table>	1.53																			
1.53																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**17792.83**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Shimar Recycling, Inc.

Mailing Address PO Box 51334

City Durham State NC Zip Code 27717-1334

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11433

Date of Disbursement

/   /

Amount of Each Disbursement this Period

198.55

**B.**

Full Name (Last, First, Middle Initial)  
Carolina Vending

Mailing Address 1320 Hodges Street

City Raleigh State NC Zip Code 27604

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11434

Date of Disbursement

/   /

Amount of Each Disbursement this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)  
Carolina Vending

Mailing Address 1320 Hodges Street

City Raleigh State NC Zip Code 27604

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11435

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional) .....

298.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Carolina Vending

Mailing Address 1320 Hodges Street

City Raleigh State NC Zip Code 27604

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-11436

Date of Disbursement

/   /

Amount of Each Disbursement this Period

70.00

**B.**

Full Name (Last, First, Middle Initial)

Bryan Bluestein

Mailing Address PO Box 323

City Columbia State SC Zip Code 29202

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-11437

Date of Disbursement

/   /

Amount of Each Disbursement this Period

824.52

**C.**

Full Name (Last, First, Middle Initial)

John Dervin

Mailing Address 105-C Barksdale Drive

City Chapel Hill State NC Zip Code 27516

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-11438

Date of Disbursement

/   /

Amount of Each Disbursement this Period

47.81

See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

942.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Lowes- Chapel Hill Mailing Address 1801 Fordham Blvd	<b>Transaction ID:</b> SB23-11438-10000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div>
City State Zip Code Chapel Hill NC 27514 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>47.81</div> <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b> Full Name (Last, First, Middle Initial) Susan Jackson Mailing Address 221 Ironwoods Dr. City State Zip Code Chapel Hill NC 27516 Purpose of Disbursement Event Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-11439 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>39.72</div> See Attached Memo Entry
<b>C.</b> Full Name (Last, First, Middle Initial) Framemakers Mailing Address 1129 Weaver Dairy Rd. City State Zip Code Chapel Hill NC 27514 Purpose of Disbursement Event Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-11439-10000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>39.72</div> <b>[MEMO ITEM]</b> Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

39.72

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T Mobility- Phoenix Mailing Address PO Box 78405	<b>Transaction ID:</b> SB23-11440 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div>
City Phoenix State AZ Zip Code 85062-8405 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>89383.05</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T- Atlanta Mailing Address PO Box 105262 City Atlanta State GA Zip Code 30348-5262 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-11441 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>387.16</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Principal Life Dept. 900 Mailing Address P.O. Box 14416 City Des Moines State IA Zip Code 50306 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-11442 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3272.38</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**93042.59**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
College of Charleston ATTN: Stan Gray

Mailing Address Division of Marketing & Comm.  
66 George Street

City Charleston State SC Zip Code 29424

Purpose of Disbursement  
Security

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11443

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
The Carsey Institute Attn: C. Mildred Duncan, PhD

Mailing Address University of New Hampshire  
Huddleston Hall

City Durham State NH Zip Code 03824

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11444

Date of Disbursement

/   /

Amount of Each Disbursement this Period

664.13

**C.** Full Name (Last, First, Middle Initial)  
The Carsey Institute Attn: C. Mildred Duncan, PhD

Mailing Address University of New Hampshire  
Huddleston Hall

City Durham State NH Zip Code 03824

Purpose of Disbursement  
Site Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11445

Date of Disbursement

/   /

Amount of Each Disbursement this Period

390.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1554.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Department of the Treasury Internal Revenue Service Center Mailing Address	<b>Transaction ID:</b> SB23-11446 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 8</div> </div>
City State Zip Code Ogden UT 84201 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>71522.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) ADP Mailing Address 4101 Doie Cope Road Suite 110 City State Zip Code Raleigh NC 27613 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-11466 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>26599.65</div> <div>Category/Type</div> See Attached Memo Entry
<b>C.</b> Full Name (Last, First, Middle Initial) Judith Baran Mailing Address 109 Dillard Street City State Zip Code Carrboro NC 27510 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-11466-10000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>410.93</div> <div>Category/Type</div> <b>[MEMO ITEM]</b> Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

**98121.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Lora M. Haggard

Mailing Address 29 Briarwood Drive

City  
Ringgold

State  
GA

Zip Code  
30736

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11466-20000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3205.29

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)

Susan Jackson

Mailing Address 221 Ironwoods Dr.

City  
Chapel Hill

State  
NC

Zip Code  
27516

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11466-30000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1588.74

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)

Thomas Frederick Kroncke

Mailing Address 361 Summerwalk Cir

City  
Chapel Hill

State  
NC

Zip Code  
27517

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11466-40000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

759.39

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Laura Lee

Mailing Address 522 Ives Court

City State Zip Code  
Chapel Hill NC 27514

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11466-50000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1493.17

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Edward L Niles

Mailing Address 605 Jones Ferry Road  
Apt TT14

City State Zip Code  
Carrboro NC 27510

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11466-60000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1443.59

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Jay Petterson

Mailing Address 203-B Barksdale Drive

City State Zip Code  
Chapel Hill NC 27516

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11466-70000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

2355.09

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jessica Lynn TeSelle

Mailing Address 1304 Drewhill Lane

City State Zip Code  
Chapel Hill NC 27514

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11466-80000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1533.04

**[MEMO ITEM]**

Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
John Dervin

Mailing Address 105-C Barksdale Drive

City State Zip Code  
Chapel Hill NC 27516

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11466-90000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1880.03

**[MEMO ITEM]**

Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Matthew L Nelson

Mailing Address 2025 Freeport Drive

City State Zip Code  
Cary NC 27519

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11466-100000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3063.03

**[MEMO ITEM]**

Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
ADP

Mailing Address 4101 Doie Cope Road  
Suite 110

City Raleigh State NC Zip Code 27613

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-11466-110000

Date of Disbursement

03 / 15 / 2008

Amount of Each Disbursement this Period

8867.35

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Wachovia Bank

Mailing Address Fayetteville Street Mall

City Raleigh State NC Zip Code 27606

Purpose of Disbursement

Bank Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-14029

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

193.95

**C.**

Full Name (Last, First, Middle Initial)  
Progressive Store

Mailing Address 1910 Glen Allen Lane

City Altadena State CA Zip Code 91001

Purpose of Disbursement

Signs/Stickers/ Buttons

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-14033

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

1835.08

**SUBTOTAL** of Disbursements This Page (optional) .....

2029.03

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jim Morrill

Mailing Address 600 S. Tyron St.

City State Zip Code  
Charlotte NC 28204

Purpose of Disbursement  
Press Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

**Transaction ID:** SB23-13974

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1430.33

**B.**

Full Name (Last, First, Middle Initial)  
Garvey, Schubert Barer, PC ATTN: Renee Alston

Mailing Address 1000 Potomac Street, NW  
Suite 500

City State Zip Code  
Washington DC 20007

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

**Transaction ID:** SB23-11510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

**C.**

Full Name (Last, First, Middle Initial)  
Garvey, Schubert Barer, PC ATTN: Renee Alston

Mailing Address 1000 Potomac Street, NW  
Suite 500

City State Zip Code  
Washington DC 20007

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

**Transaction ID:** SB23-11511

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3930.33

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
Garvey, Schubert Barer, PC ATTN: Renee Alston

Mailing Address 1000 Potomac Street, NW  
Suite 500

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11512

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.46

**B.** Full Name (Last, First, Middle Initial)  
ADP

Mailing Address 4101 Doie Cope Road  
Suite 110

City Raleigh State NC Zip Code 27613

Purpose of Disbursement  
Payroll Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-14031

Date of Disbursement

/   /

Amount of Each Disbursement this Period

191.00

**C.** Full Name (Last, First, Middle Initial)  
Pitney Bowes Inc

Mailing Address PO Box 856390

City Louisville State KY Zip Code 40285-6390

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11578

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6210.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) USRental.com</p> <p>Mailing Address 970 Summer Street</p> <p>City Stamford State CT Zip Code 06905</p> <p>Purpose of Disbursement Equipment Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-11573</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 9351.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) USRental.com</p> <p>Mailing Address 970 Summer Street</p> <p>City Stamford State CT Zip Code 06905</p> <p>Purpose of Disbursement Equipment Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-11574</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 3064.55</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) USRental.com</p> <p>Mailing Address 970 Summer Street</p> <p>City Stamford State CT Zip Code 06905</p> <p>Purpose of Disbursement Equipment Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-11575</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 365.38</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**12780.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
USRental.com

Mailing Address 970 Summer Street

City State Zip Code  
Stamford CT 06905

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11576

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4025.00

**B.**

Full Name (Last, First, Middle Initial)  
Travelers

Mailing Address CL/Specialty Remittance Ctr

City State Zip Code  
Hartford CT 06183

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11577

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2881.00

**C.**

Full Name (Last, First, Middle Initial)  
Covad Communications Dept. 33258

Mailing Address PO Box 39000

City State Zip Code  
San Francisco CA 94139-3258

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11579

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2002.97

**SUBTOTAL** of Disbursements This Page (optional) .....

8908.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
Covad Communications Dept. 33258

Mailing Address PO Box 39000

City San Francisco State CA Zip Code 94139-3258

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-11580

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2004.75

**B.** Full Name (Last, First, Middle Initial)  
ADP

Mailing Address 4101 Doie Cope Road  
Suite 110

City Raleigh State NC Zip Code 27613

Purpose of Disbursement  
Payroll Services

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-14032

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.00

**C.** Full Name (Last, First, Middle Initial)  
ADP

Mailing Address 4101 Doie Cope Road  
Suite 110

City Raleigh State NC Zip Code 27613

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13762

Date of Disbursement

/   /

Amount of Each Disbursement this Period

24952.48

See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

27104.23

**TOTAL** This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Lora M. Haggard	<b>Transaction ID:</b> SB23-13762-10000 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 28 / 2008</div> </div>
Mailing Address     29 Briarwood Drive	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right;">3205.29</div>
<div style="display: flex; justify-content: space-between;"> <div>City Ringgold</div> <div>State GA</div> <div>Zip Code 30736</div> </div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Purpose of Disbursement Salary	<div style="border: 1px solid black; padding: 5px; text-align: center;">Category/ Type</div>
Candidate Name	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<div style="display: flex;"> <div style="flex: 1;">           Office Sought:           <div style="display: flex; flex-direction: column; margin-left: 5px;"> <input type="checkbox"/> House             <input type="checkbox"/> Senate             <input type="checkbox"/> President           </div> </div> <div style="flex: 1;">           Disbursement For:     2008  <input checked="" type="checkbox"/> Primary     <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	<b>[MEMO ITEM]</b> Memo Entry
State:     District:	
<b>B.</b> Full Name (Last, First, Middle Initial) Susan Jackson	<b>Transaction ID:</b> SB23-13762-20000 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 28 / 2008</div> </div>
Mailing Address     221 Ironwoods Dr.	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right;">1588.74</div>
<div style="display: flex; justify-content: space-between;"> <div>City Chapel Hill</div> <div>State NC</div> <div>Zip Code 27516</div> </div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Purpose of Disbursement Salary	<div style="border: 1px solid black; padding: 5px; text-align: center;">Category/ Type</div>
Candidate Name	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<div style="display: flex;"> <div style="flex: 1;">           Office Sought:           <div style="display: flex; flex-direction: column; margin-left: 5px;"> <input type="checkbox"/> House             <input type="checkbox"/> Senate             <input type="checkbox"/> President           </div> </div> <div style="flex: 1;">           Disbursement For:     2008  <input checked="" type="checkbox"/> Primary     <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	<b>[MEMO ITEM]</b> Memo Entry
State:     District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Laura Lee	<b>Transaction ID:</b> SB23-13762-30000 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>03 / 28 / 2008</div> </div>
Mailing Address     522 Ives Court	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right;">1493.17</div>
<div style="display: flex; justify-content: space-between;"> <div>City Chapel Hill</div> <div>State NC</div> <div>Zip Code 27514</div> </div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Purpose of Disbursement Salary	<div style="border: 1px solid black; padding: 5px; text-align: center;">Category/ Type</div>
Candidate Name	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<div style="display: flex;"> <div style="flex: 1;">           Office Sought:           <div style="display: flex; flex-direction: column; margin-left: 5px;"> <input type="checkbox"/> House             <input type="checkbox"/> Senate             <input type="checkbox"/> President           </div> </div> <div style="flex: 1;">           Disbursement For:     2008  <input checked="" type="checkbox"/> Primary     <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	<b>[MEMO ITEM]</b> Memo Entry
State:     District:	
<div style="display: flex; justify-content: space-between;"> <div> <b>SUBTOTAL</b> of Disbursements This Page (optional) .....         </div> <div style="border: 1px solid black; padding: 5px; text-align: right; width: 150px;">0.00</div> </div>	
<div style="display: flex; justify-content: space-between;"> <div> <b>TOTAL</b> This Period (last page this line number only) .....         </div> <div style="border: 1px solid black; padding: 5px; text-align: right; width: 150px;"></div> </div>	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Edward L Niles

Mailing Address 605 Jones Ferry Road  
Apt TT14

City Carrboro State NC Zip Code 27510

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13762-40000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1443.59

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Jay Petterson

Mailing Address 203-B Barksdale Drive

City Chapel Hill State NC Zip Code 27516

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13762-50000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

2355.09

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Jessica Lynn TeSelle

Mailing Address 1304 Drewhill Lane

City Chapel Hill State NC Zip Code 27514

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13762-60000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1541.48

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
John Dervin

Mailing Address 105-C Barksdale Drive

City State Zip Code  
Chapel Hill NC 27516Purpose of Disbursement  
Salary

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13762-70000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	0	8

Amount of Each Disbursement this Period

1880.03

**[MEMO ITEM]**  
Memo Entry

B.

Full Name (Last, First, Middle Initial)  
Matthew L Nelson

Mailing Address 2025 Freeport Drive

City State Zip Code  
Cary NC 27519Purpose of Disbursement  
Salary

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13762-80000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	0	8

Amount of Each Disbursement this Period

3063.02

**[MEMO ITEM]**  
Memo Entry

C.

Full Name (Last, First, Middle Initial)  
ADPMailing Address 4101 Doie Cope Road  
Suite 110City State Zip Code  
Raleigh NC 27613Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13762-90000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	0	8

Amount of Each Disbursement this Period

8382.07

**[MEMO ITEM]**  
Memo Entry

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Toshiba Business Systems Carolinas

Mailing Address 9201-J Southern Pine Boulevard

City State Zip Code  
Charlotte NC 28273

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13704

Date of Disbursement

/   /

Amount of Each Disbursement this Period

497.44

**B.**

Full Name (Last, First, Middle Initial)  
Alicia J Brown

Mailing Address 410 Hidden Valley Road

City State Zip Code  
Media PA 19063

Purpose of Disbursement  
Rail Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13705

Date of Disbursement

/   /

Amount of Each Disbursement this Period

122.00

**C.**

Full Name (Last, First, Middle Initial)  
Angela L Siecker

Mailing Address 10802 Lincoln Heights

City State Zip Code  
Hagerstown MD 21740

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13706

Date of Disbursement

/   /

Amount of Each Disbursement this Period

217.40

**SUBTOTAL** of Disbursements This Page (optional) .....

836.84

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Angela L Siecker

Mailing Address 10802 Lincoln Heights

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13707

Date of Disbursement

03 / 30 / 2008

Amount of Each Disbursement this Period

90.00

B.

Full Name (Last, First, Middle Initial)

Angela L Siecker

Mailing Address 10802 Lincoln Heights

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Delivery

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13708

Date of Disbursement

03 / 30 / 2008

Amount of Each Disbursement this Period

16.25

See Attached Memo Entry

C.

Full Name (Last, First, Middle Initial)

US Postmaster

Mailing Address 125 South Estes Drive

City Chapel Hill State NC Zip Code 27514

Purpose of Disbursement  
Delivery

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13708-10000

Date of Disbursement

03 / 30 / 2008

Amount of Each Disbursement this Period

16.25

[MEMO ITEM]  
Memo Entry

SUBTOTAL of Disbursements This Page (optional) .....

106.25

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) SV Center</p> <p>Mailing Address 400 Market Street Suite 200</p> <p>City Chapel Hill State NC Zip Code 27516</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-13709</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 120.42</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) UPS- Philadelphia</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-13710</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1.63</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Washington Promotions &amp; Printing</p> <p>Mailing Address 5125 MacArthur Boulevard, NW Suite 14</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Signs/Stickers/ Buttons</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-13711</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2254.56</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

2376.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Washington Promotions &amp; Printing</p> <p>Mailing Address 5125 MacArthur Boulevard, NW Suite 14</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-13712</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 78.64</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Washington Promotions &amp; Printing</p> <p>Mailing Address 5125 MacArthur Boulevard, NW Suite 14</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-13713</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 244.56</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Washington Promotions &amp; Printing</p> <p>Mailing Address 5125 MacArthur Boulevard, NW Suite 14</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Printing/Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-13714</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 822.75</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

1145.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Dorrian Communications LLC

Mailing Address 928 Morton Avenue

City State Zip Code  
Des Moines IA 50316

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13715

Date of Disbursement

/   /

Amount of Each Disbursement this Period

857.33

**B.**

Full Name (Last, First, Middle Initial)  
Artistic Waste Services, Inc.

Mailing Address PO Box 697

City State Zip Code  
Des Moines IA 50303-0697

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13716

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.90

**C.**

Full Name (Last, First, Middle Initial)  
Artistic Waste Services, Inc.

Mailing Address PO Box 697

City State Zip Code  
Des Moines IA 50303-0697

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

69.81

**SUBTOTAL** of Disbursements This Page (optional) .....

943.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Artistic Waste Services, Inc.

Mailing Address PO Box 697

City State Zip Code  
Des Moines IA 50303-0697

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13718

Date of Disbursement

/   /

Amount of Each Disbursement this Period

421.31

**B.**

Full Name (Last, First, Middle Initial)  
Lexis Nexis

Mailing Address PO Box 7247-7090

City State Zip Code  
Philadelphia PA 19170-7090

Purpose of Disbursement  
Licenses & Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13719

Date of Disbursement

/   /

Amount of Each Disbursement this Period

900.00

**C.**

Full Name (Last, First, Middle Initial)  
Action Office Solutions

Mailing Address 5500 NW Johnston Drive  
Suite C

City State Zip Code  
Johnston IA 50131

Purpose of Disbursement  
Printing/Copying

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13720

Date of Disbursement

/   /

Amount of Each Disbursement this Period

409.34

**SUBTOTAL** of Disbursements This Page (optional) .....

1730.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Nevada Power Company

Mailing Address PO Box 30086

City State Zip Code  
Reno NV 89520

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13724

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.95

**B.**

Full Name (Last, First, Middle Initial)  
Alliant Energy

Mailing Address PO Box 3066

City State Zip Code  
Cedar Rapids IA 52406-3066

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13725

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.27

**C.**

Full Name (Last, First, Middle Initial)  
Time Warner Cable- Charlotte

Mailing Address PO Box 70992

City State Zip Code  
Charlotte NC 28272-0992

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13726

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1071.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Cox Communications, Inc.

**Transaction ID:** SB23-13727

Date of Disbursement

/   /

Mailing Address 750 N Rancho Drive

Amount of Each Disbursement this Period

City Las Vegas State NV Zip Code 89106

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Frontier Communications

**Transaction ID:** SB23-13728

Date of Disbursement

/   /

Mailing Address PO Box 92833

Amount of Each Disbursement this Period

City Rochester State NY Zip Code 14692

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
Frontier Communications

**Transaction ID:** SB23-13729

Date of Disbursement

/   /

Mailing Address PO Box 92833

Amount of Each Disbursement this Period

City Rochester State NY Zip Code 14692

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Embarq

Mailing Address PO Box 660068

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13730

Date of Disbursement

/   /

Amount of Each Disbursement this Period

491.89

**B.**

Full Name (Last, First, Middle Initial)  
AT&T - Sacramento

Mailing Address P.O. Box 989045

City Sacramento State CA Zip Code 95798

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13731

Date of Disbursement

/   /

Amount of Each Disbursement this Period

484.73

**C.**

Full Name (Last, First, Middle Initial)  
City of Indianola, IA

Mailing Address PO Box 299

City Indianola State IA Zip Code 50125

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

44.75

**SUBTOTAL** of Disbursements This Page (optional) .....

1021.37

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sierra Pacific

Mailing Address PO Box 10100  
6100 Neil Road

City Reno State NV Zip Code 89511

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13733

Date of Disbursement

/   /

Amount of Each Disbursement this Period

113.71

**B.**

Full Name (Last, First, Middle Initial)  
Mason City Public Utilities

Mailing Address 10 First Street, NW

City Mason City State IA Zip Code 50401

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13734

Date of Disbursement

/   /

Amount of Each Disbursement this Period

58.96

**C.**

Full Name (Last, First, Middle Initial)  
Mason City Public Utilities

Mailing Address 10 First Street, NW

City Mason City State IA Zip Code 50401

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13735

Date of Disbursement

/   /

Amount of Each Disbursement this Period

53.02

**SUBTOTAL** of Disbursements This Page (optional) .....

225.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Laser World

Mailing Address P.O. Box 26089

City State Zip Code  
Las Vegas NV 89121

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13736

Date of Disbursement

/   /

Amount of Each Disbursement this Period

618.40

**B.**

Full Name (Last, First, Middle Initial)  
One Communications

Mailing Address P.O. Box 981039

City State Zip Code  
Boston MA 02298

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21622.04

**C.**

Full Name (Last, First, Middle Initial)  
Event Decorators of Iowa, Inc.

Mailing Address 520 SE 4th Street

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13738

Date of Disbursement

/   /

Amount of Each Disbursement this Period

346.62

**SUBTOTAL** of Disbursements This Page (optional) .....

22587.06

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Event Decorators of Iowa, Inc.

Mailing Address 520 SE 4th Street

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

477.00

**B.**

Full Name (Last, First, Middle Initial)  
Event Decorators of Iowa, Inc.

Mailing Address 520 SE 4th Street

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13740

Date of Disbursement

/   /

Amount of Each Disbursement this Period

190.80

**C.**

Full Name (Last, First, Middle Initial)  
Event Decorators of Iowa, Inc.

Mailing Address 520 SE 4th Street

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13741

Date of Disbursement

/   /

Amount of Each Disbursement this Period

419.76

**SUBTOTAL** of Disbursements This Page (optional) .....

1087.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
Event Decorators of Iowa, Inc.

Mailing Address 520 SE 4th Street

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13742

Date of Disbursement

/   /

Amount of Each Disbursement this Period

190.80

**B.** Full Name (Last, First, Middle Initial)  
Concord Steam Corporation

Mailing Address P.O. Box 2520

City State Zip Code  
Concord NH 03302

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13743

Date of Disbursement

/   /

Amount of Each Disbursement this Period

855.31

**C.** Full Name (Last, First, Middle Initial)  
Allied Waste Services

Mailing Address PO Box 9001099

City State Zip Code  
Louisville KY 40290-1099

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.86

**SUBTOTAL** of Disbursements This Page (optional) .....

1065.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Markeys Audio Visual	<b>Transaction ID:</b> SB23-13745 <b>Date of Disbursement</b>																				
Mailing Address 4934 Franklin Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	8												
City Des Moines State IA Zip Code 50310	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Equipment Rental	<table border="1"> <tr> <td colspan="10">517.00</td> </tr> </table>	517.00																			
517.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Northern Utilities	<b>Transaction ID:</b> SB23-13746 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 9001848	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	8												
City Louisville State KY Zip Code 40290	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Utilities	<table border="1"> <tr> <td colspan="10">101.06</td> </tr> </table>	101.06																			
101.06																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Comcast - NJ	<b>Transaction ID:</b> SB23-13748 <b>Date of Disbursement</b>																				
Mailing Address PO Box 1577	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	8												
City Newark State NJ Zip Code 07101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Utilities	<table border="1"> <tr> <td colspan="10">105.11</td> </tr> </table>	105.11																			
105.11																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**723.17**

**TOTAL** This Period (last page this line number only) .....

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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
New Hampshire Electric Co-Op

Mailing Address PO Box 9612

City Manchester State NH Zip Code 03108

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13749

Date of Disbursement

03 / 30 / 2008

Amount of Each Disbursement this Period

226.23

**B.** Full Name (Last, First, Middle Initial)  
New Hampshire Electric Co-Op

Mailing Address PO Box 9612

City Manchester State NH Zip Code 03108

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13750

Date of Disbursement

03 / 30 / 2008

Amount of Each Disbursement this Period

62.88

**C.** Full Name (Last, First, Middle Initial)  
MetroCast CableVision

Mailing Address PO Box 9253

City Chelsea State MA Zip Code 02150

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13751

Date of Disbursement

03 / 30 / 2008

Amount of Each Disbursement this Period

56.07

**SUBTOTAL** of Disbursements This Page (optional) .....

345.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial)  
Town of Derry Attn: Tax Collector

Mailing Address PO Box 405

City Derry State NH Zip Code 03038

Purpose of Disbursement  
Security

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13752

Date of Disbursement

/   /

Amount of Each Disbursement this Period

190.00

**B.** Full Name (Last, First, Middle Initial)  
BB&T

Mailing Address Branch 12501

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-14035

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.00

**C.** Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265-0448

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13766

Date of Disbursement

/   /

Amount of Each Disbursement this Period

101822.54

See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

102051.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jet Blue

Mailing Address PO Box 17435

City State Zip Code  
Salt Lake City UT 84117

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13766-10000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-6.30

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address P.O. Box 619612

City State Zip Code  
DFW Airport TX 76021

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13766-20000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1332.00

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Amtrak

Mailing Address P.O. Box 7717

City State Zip Code  
Itasca IL 60143

Purpose of Disbursement  
Rail Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23-13766-30000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.00

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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PAGE 113 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Bronto Software Inc.

Mailing Address 324 Blackwell Street

City Durham State NC Zip Code 27701

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-40000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Courtyard Chapel Hill

Mailing Address 100 Marriott Way

City Chapel Hill State NC Zip Code 27517

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-50000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1335.10

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Delta Airlines

Mailing Address P.O. Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-60000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

770.00

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Duplication Factory	<b>Transaction ID:</b> SB23-13766-70000 <b>Date of Disbursement</b>																				
Mailing Address 4275 Norex Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	8												
City Chaska State MN Zip Code 55318	Amount of Each Disbursement this Period																				
Purpose of Disbursement Paraphernalia	<table border="1"> <tr> <td colspan="10">906.99</td> </tr> </table>	906.99																			
906.99																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Express Jet	<b>Transaction ID:</b> SB23-13766-80000 <b>Date of Disbursement</b>																				
Mailing Address 700 N. Sam Houston Pkwy W. Suite 200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	8												
City Houston State TX Zip Code 77067	Amount of Each Disbursement this Period																				
Purpose of Disbursement Airfare	<table border="1"> <tr> <td colspan="10">239.02</td> </tr> </table>	239.02																			
239.02																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Federal Express	<b>Transaction ID:</b> SB23-13766-90000 <b>Date of Disbursement</b>																				
Mailing Address 942 South Shady Grove Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	8												
City Memphis State TN Zip Code 38120	Amount of Each Disbursement this Period																				
Purpose of Disbursement Delivery	<table border="1"> <tr> <td colspan="10">70.38</td> </tr> </table>	70.38																			
70.38																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Greyhound Lines

Mailing Address 1107 Keosauqua Way

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-100000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

2844.00

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Groome Transport / Chattanooga

Mailing Address 5712 Ringgold Rd.

City State Zip Code  
Chattanooga TN 37412

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-110000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Hotel Fort Des Moines

Mailing Address 1000 Walnut

City State Zip Code  
Des Moines IA 50309

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-120000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

311.36

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Loews Hotel New Orleans

Mailing Address 300 Poydras St

City State Zip Code  
New Orleans LA 70130

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-130000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

224.00

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
National Car Rental

Mailing Address 6929 North Lakewood Avenue  
Suite 100

City State Zip Code  
Tulsa OK 74117

Purpose of Disbursement  
Auto Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-140000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

79319.27

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
New Flight Charters

Mailing Address 525 Ponderosa  
A-4

City State Zip Code  
Jackson WY 83001

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-150000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1217.17

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) New York Times Mailing Address PO Box 371456	<b>Transaction ID:</b> SB23-13766-160000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div>
City Pittsburgh State PA Zip Code 15250-7456 Purpose of Disbursement Subscriptions Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>102.40</div> <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b> Full Name (Last, First, Middle Initial) Peer 1 Dedicated Hosting Mailing Address P.O. Box 643 607	<b>Transaction ID:</b> SB23-13766-170000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div>
City Cincinatti State OH Zip Code 45264 Purpose of Disbursement Computer Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>3323.90</div> <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b> Full Name (Last, First, Middle Initial) QOOP Digital Printing Mailing Address 26 Sunnyside Ave., Suite A345	<b>Transaction ID:</b> SB23-13766-180000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div>
City Mill Valley State CA Zip Code 94941 Purpose of Disbursement Printing/Copying Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>36.14</div> <b>[MEMO ITEM]</b> Memo Entry
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>0.00</div> <b>TOTAL</b> This Period (last page this line number only) ..... ▶

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Qwest Mailing Address PO Box 91154	<b>Transaction ID:</b> SB23-13766-190000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div>
City State Zip Code Seattle WA 98111-9254 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>309.77</div> <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b> Full Name (Last, First, Middle Initial) Radisson Nashua Mailing Address 11 Tara Blvd City State Zip Code Nashua NH 03062 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-13766-200000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>-3080.16</div> <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b> Full Name (Last, First, Middle Initial) Rolling Bones Barbeque Mailing Address 377 Edgewood Ave SE City State Zip Code Atlanta GA 30312 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23-13766-210000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>488.60</div> <b>[MEMO ITEM]</b> Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
SCI Rentals

Mailing Address 1705 Legion Rd., Suite 100

City State Zip Code  
Chapel Hill NC 27517

Purpose of Disbursement  
Equipment Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-220000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

3242.66

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Southern Coach Company

Mailing Address P.O. Box 11345

City State Zip Code  
Durham NC 27703

Purpose of Disbursement  
Auto Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-230000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

711.96

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Southwest Airlines

Mailing Address P.O. Box 36647 - 1CR

City State Zip Code  
Dallas TX 75235-1647

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-240000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

309.00

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Staples- Chapel Hill

Mailing Address 1710 East Franklin Street

City State Zip Code  
Chapel Hill NC 27514

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-250000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

286.42

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
TiVo Inc.

Mailing Address 2160 Gold Street  
P.O. Box 2160

City State Zip Code  
Alviso CA 95002

Purpose of Disbursement  
Subscriptions

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-260000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

32.85

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
Carroll Travel

Mailing Address 201 Massachusetts Avenue, NE

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Travel Agency Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-270000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

330.00

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
UPS- Carol Stream

Mailing Address Lockbox 577

City Carol Stream State IL Zip Code 60132-0577

Purpose of Disbursement  
Delivery

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-280000  
Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

1033.75

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-290000  
Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

2991.00

**[MEMO ITEM]**  
Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
U-Save Auto Rental-Manchester

Mailing Address 2075 S. Willow St.

City Manchester State NH Zip Code 03103

Purpose of Disbursement  
Auto Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-13766-300000  
Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

86.80

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster Mailing Address 125 South Estes Drive	<b>Transaction ID:</b> SB23-13766-310000 <b>Date of Disbursement</b> <div> <div>03</div> <div>31</div> <div>2008</div> </div>
City State Zip Code Chapel Hill NC 27514 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>136.70</div> <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b> Full Name (Last, First, Middle Initial) Volusion Inc. Mailing Address 1736 Erringer Rd. City State Zip Code Simi Valley CA 93065 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-13766-320000 <b>Date of Disbursement</b> <div> <div>03</div> <div>31</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>192.95</div> <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b> Full Name (Last, First, Middle Initial) Webair Internet Development Mailing Address 333 Jericho Turnpike Suite 200 City State Zip Code Jericho NY 11753 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23-13766-330000 <b>Date of Disbursement</b> <div> <div>03</div> <div>31</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>399.00</div> <b>[MEMO ITEM]</b> Memo Entry
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div> <b>TOTAL</b> This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 774

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Newegg.com

Mailing Address 9997 E. Rose Hills Rd.

City State Zip Code  
Whittier CA 90601

Purpose of Disbursement  
Computer Equipment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23-13766-340000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1691.81

**[MEMO ITEM]**

Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Unitemized Line 23 Expenditures

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23UNITEMIZED-1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

0.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

556307.50

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Thomas Fay</p> <p>Mailing Address 700 5th St NW Ste 200</p> <p>City Washington State DC Zip Code 20001-2752</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13057</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Ronald Feldman</p> <p>Mailing Address 4 Helena Dr</p> <p>City Chappaqua State NY Zip Code 10514-1905</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13058</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Rebecca R Freedman</p> <p>Mailing Address 51 Perry St # 2</p> <p>City Somerville State MA Zip Code 02143-3818</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13060</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Terry C Hooks

Mailing Address 2034 country club rd

City Birmingham State AL Zip Code 35244

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13070

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1800.00

**B.**

Full Name (Last, First, Middle Initial)

Rhon E Jones

Mailing Address 9272 Gainswood

City Montgomery State AL Zip Code 36117-5120

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13073

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1450.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Kelleher

Mailing Address 669 9th Ave S

City Naples State FL Zip Code 34102-6937

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13074

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Mary Littleton

Mailing Address 420 Elmington Ave Apt 102

City Nashville State TN Zip Code 37205-2590

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11581

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)  
Sherry Buchsbaum

Mailing Address 1212 5th Ave Apt 14B

City New York State NY Zip Code 10029-5219

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11582

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Don Garrett

Mailing Address 22221 Avenue San Luis

City Woodland Hills State CA Zip Code 91364-1507

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11583

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

530.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jon Zion

Mailing Address 500 SE Mizner Blvd Apt A107

City State Zip Code  
Boca Raton FL 33432-6080

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11584

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**B.**

Full Name (Last, First, Middle Initial)  
Amy Bachelder

Mailing Address 10845 Elgin Ave

City State Zip Code  
Huntington Woods MI 48070-1538

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11586

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
Barbara E Hiatt

Mailing Address 525 Broadway Apt 404

City State Zip Code  
Tacoma WA 98402-3911

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11587

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1370.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David Ruffin

Mailing Address 3520 Carlton Square Pl

City Raleigh State NC Zip Code 27612-4321

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11588

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Tiemann

Mailing Address 125 Graylyn Dr

City Chapel Hill State NC Zip Code 27516-4456

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11589

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Bryon Line

Mailing Address 10401 Grosvenor Pl Apt 123

City Rockville State MD Zip Code 20852-4628

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11590

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1990.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5490.00

**TOTAL** This Period (last page this line number only) .....



	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

2300.00

1000.00

2300.00

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Timothy Butcher

Mailing Address 3005 NE 49th St

City State Zip Code  
Vancouver WA 98663-2140

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11594

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1170.00

**B.**

Full Name (Last, First, Middle Initial)  
Kathryn Gray

Mailing Address 2060 Webster St

City State Zip Code  
Palo Alto CA 94301-4049

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11595

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Peter Mccauley

Mailing Address 320 E 25th St

City State Zip Code  
New York NY 10010-3140

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11596

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3520.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 131 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Howard Twiggs

Mailing Address PO Box 30

City Raleigh State NC Zip Code 27602-0030

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11597

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Doug Abrams

Mailing Address 5101 Huntingwood Dr

City Raleigh State NC Zip Code 27606-9639

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11598

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Laura J Wirthlin

Mailing Address 11234 Midnight Pass

City Fishers State IN Zip Code 46037-9381

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 132 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Leto Copeley

Mailing Address 100 Vireo Ln

City Hillsborough State NC Zip Code 27278-7919

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11600

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Elliot S Abrams

Mailing Address 15 Davie Cir

City Chapel Hill State NC Zip Code 27514-5902

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11601

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Patrick

Mailing Address 823 Creekstone Dr

City Chapel Hill State NC Zip Code 27516-9631

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11602

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4245.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charles R Hardee

Mailing Address 2741 Bells Fork Rd

City Greenville State NC Zip Code 27858-8870

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11603

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Pamella Gronemeyer

Mailing Address 34 kingsley way

City glen carbon State IL Zip Code 62034

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11604

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1725.00

**C.**

Full Name (Last, First, Middle Initial)  
Josh Stein

Mailing Address 310 E Forest Dr

City Raleigh State NC Zip Code 27605-1754

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 134 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Granville Bowie

Mailing Address 35 Summer St

City State Zip Code  
Kennebunk ME 04043-6636

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11606

Date of Disbursement

/   /

Amount of Each Disbursement this Period

950.00

**B.**

Full Name (Last, First, Middle Initial)  
Adam Stein

Mailing Address 222 Vance St

City State Zip Code  
Chapel Hill NC 27516-2923

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11607

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Tim Toben

Mailing Address 8300 Pickards Meadow Rd

City State Zip Code  
Chapel Hill NC 27516-4861

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5350.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jane Gill-Shaler

Mailing Address 1636 W Lexington Ave

City State Zip Code  
High Point NC 27262-8349

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11612

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.11

**B.**

Full Name (Last, First, Middle Initial)  
John Dains

Mailing Address 1209 Green Street #1

City State Zip Code  
San Francisco CA 94109

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11613

Date of Disbursement

/   /

Amount of Each Disbursement this Period

504.00

**C.**

Full Name (Last, First, Middle Initial)  
Phil Walsh

Mailing Address 1620 NE Broadway St

City State Zip Code  
Portland OR 97232-1799

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2835.11

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Anne E Swenson

Mailing Address 6629 York St

City State Zip Code  
Fort Worth TX 76132-3586

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

504.00

**B.**

Full Name (Last, First, Middle Initial)  
Waynelle Mason

Mailing Address PO Box 635

City State Zip Code  
Sapulpa OK 74067-0635

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michelle Riley

Mailing Address 308 W 8th St

City State Zip Code  
Plainfield NJ 07060-2360

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1104.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Susan Israel

Mailing Address 470 Reis Avenue

City State Zip Code  
Teaneck NJ 7666

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11620

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
Maryann Ruggiero

Mailing Address 2503 Field Master Dr

City State Zip Code  
Monroe NC 28110-7082

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

0.10

**C.**

Full Name (Last, First, Middle Initial)  
Brandon Cruse

Mailing Address 510 W Main St Apt 201

City State Zip Code  
Madison WI 53703-4790

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11623

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2100.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 139 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Roger Pardieck

Mailing Address 4181 S Summit Ln

City State Zip Code  
Columbus IN 47201-8955

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11624

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy Santelli

Mailing Address 177 Barone PI NW

City State Zip Code  
Atlanta GA 30327-1073

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11625

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Paul Verger

Mailing Address 1211 Pico Blvd Apt 20

City State Zip Code  
Santa Monica CA 90405-1457

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11626

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Joan Erwin

Mailing Address 501 E Morehead St Ste 3

City Charlotte State NC Zip Code 28202-2630

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11627

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Erwin

Mailing Address 501 E Morehead St Ste 3

City Charlotte State NC Zip Code 28202-2630

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11628

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Ines Pauk

Mailing Address 67 Ingram St # 50

City Forest Hills State NY Zip Code 11375-6828

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11629

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2076.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6676.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charles Siegel

Mailing Address 7426 Kenshire Ln

City Dallas State TX Zip Code 75230-2408

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11630

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lisa Siegel

Mailing Address 7426 Kenshire Ln

City Dallas State TX Zip Code 75230-2408

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11631

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gerald Dudzik

Mailing Address 167 Cornell St

City Windsor State CA Zip Code 95492-8743

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11632

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lloyd Kelso

Mailing Address PO Box 2065

City Gastonia State NC Zip Code 28053-2065

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11633

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Stewart M Casper

Mailing Address 72 Seir Hill Rd

City Wilton State CT Zip Code 06897-4207

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11634

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Laura D Edwards

Mailing Address 406 W Patterson Pl

City Chapel Hill State NC Zip Code 27516-2736

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11636

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Elaine Andrews

Mailing Address 406 W Patterson Pl

City State Zip Code  
Chapel Hill NC 27516-2736

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11637

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jane B Preyer

Mailing Address 307 E Rosemary St

City State Zip Code  
Chapel Hill NC 27514-3531

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11638

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jesse Jacobs

Mailing Address 235 W 75th St

City State Zip Code  
New York NY 10023-1700

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11639

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 144 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mr Clifford P Britt

Mailing Address 3870 Will Scarlet Rd

City  
Winston Salem

State  
NC

Zip Code  
27104-2727

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11640

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)

Joanna Britt

Mailing Address 3870 Will Scarlet Rd

City  
Winston Salem

State  
NC

Zip Code  
27104-2727

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

Reid Hartson

Mailing Address 4 Doverwood

City  
San Antonio

State  
TX

Zip Code  
78248-1626

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Lyndon Cooper

Mailing Address 202 Wood Lily Ln

City Cary State NC Zip Code 27518-8310

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11643

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

M Carter Worthy

Mailing Address 2300 White Oak Rd

City Raleigh State NC Zip Code 27608-1456

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11644

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Willis P Whichard

Mailing Address 84402 Winslow

City Chapel Hill State NC Zip Code 27517-8539

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11645

Date of Disbursement

/   /

Amount of Each Disbursement this Period

900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Rosemary I Waldorf

Mailing Address 106 Gurnsey Trl

City Chapel Hill State NC Zip Code 27517-7507

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11646

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ed Turlington

Mailing Address 1212 Westmoreland Dr

City Raleigh State NC Zip Code 27612-4735

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11647

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Isaac L Thorp

Mailing Address 114 Topsail Ct

City Cary State NC Zip Code 27511-7207

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11648

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 147 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Patricia H Spearman

Mailing Address 3508 Andrews Ln

City Raleigh State NC Zip Code 27607-3403

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11649

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Sallie Shuping Russell

Mailing Address 507 E Rosemary St

City Chapel Hill State NC Zip Code 27514-3714

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11650

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
John S Russell

Mailing Address 507 E Rosemary St

City Chapel Hill State NC Zip Code 27514-3714

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11651

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Cornelia H Mcmillan	<b>Transaction ID:</b> SB28A-11652 <b>Date of Disbursement</b>																				
Mailing Address 908 W Johnson St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Raleigh State NC Zip Code 27605-1762	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Evelyn D Kirby	<b>Transaction ID:</b> SB28A-11653 <b>Date of Disbursement</b>																				
Mailing Address 504 Hertford St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Raleigh State NC Zip Code 27609-6906	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Dean E Smith	<b>Transaction ID:</b> SB28A-11654 <b>Date of Disbursement</b>																				
Mailing Address 105 Fox Run	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Chapel Hill State NC Zip Code 27516-0608	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**5200.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 149 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

David F Kirby

Mailing Address 504 Hertford St

City  
Raleigh

State  
NC

Zip Code  
27609-6906

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11655

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)

Robert E Whitley

Mailing Address PO Box 5309

City  
Kinston

State  
NC

Zip Code  
28503-5309

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11656

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Price Taylor Harrison

Mailing Address PO Box 9339

City  
Greensboro

State  
NC

Zip Code  
27429-0339

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11657

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Donald B Durham

Mailing Address 630 Trace Dr

City State Zip Code  
Wilmington NC 28411-7326

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
John W Davis, III

Mailing Address 411 S Marshall St  
Ste 401

City State Zip Code  
Winston Salem NC 27101-5293

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Randolph E Cloud

Mailing Address 2440 Oxford Rd

City State Zip Code  
Raleigh NC 27608-1538

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11660

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 151 / 774

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☒ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David E Bonior

Mailing Address 52 Belleview St

City State Zip Code  
Mount Clemens MI 48043-2241

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11661

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
John L Atkins, III

Mailing Address 3915 Eton Rd

City State Zip Code  
Durham NC 27707-5121

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11662

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
John S Arrowood

Mailing Address 228 S Laurel Ave

City State Zip Code  
Charlotte NC 28207-1520

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11663

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 152 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Laurie Armstrong

Mailing Address 10504 Tredwood Dr

City Raleigh State NC Zip Code 27615-1159

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11664

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Gusler

Mailing Address 812 W Johnson St

City Raleigh State NC Zip Code 27605-1763

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11665

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

James A Heavner

Mailing Address 719 Gimghoul Rd

City Chapel Hill State NC Zip Code 27514-3814

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Terrie A Davis

Mailing Address 411 S Marshall St  
Ste 401

City Winston Salem State NC Zip Code 27101-5293

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11667

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

John A Forlines, Jr

Mailing Address 36 Pinewood Rd

City Granite Falls State NC Zip Code 28630-1229

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11668

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Bruce N Petersen

Mailing Address RR 3 Box 781

City Fayetteville State WV Zip Code 25840-9701

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11669

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 154 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ms Lisbeth C Evans

Mailing Address 8 W 3rd St Ste M7

City  
Winston Salem

State  
NC

Zip Code  
27101-3928

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11670

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Susan S Chappell

Mailing Address 6148 Marthas Glen Rd

City  
Columbia

State  
SC

Zip Code  
29209-1313

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mark D Chappell, Jr

Mailing Address 6148 Marthas Glen Rd

City  
Columbia

State  
SC

Zip Code  
29209-1313

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11672

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Susan Jackson Phillips

Mailing Address 2601 W Market St

City Greensboro State NC Zip Code 27403-1521

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11673

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Barbara D Davis

Mailing Address 4800 23rd Rd S

City Arlington State VA Zip Code 22206-1011

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11674

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)  
Glen E Rammelsberg

Mailing Address PO Box 13

City Blainstown State IA Zip Code 52209-0013

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4364.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Gregory A Roach

Mailing Address 2107 37th St NW

City State Zip Code  
Canton OH 44709-2305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11676

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Helen J Hodges

Mailing Address 2218 Juan St

City State Zip Code  
San Diego CA 92103-1109

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11677

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2100.00

C.

Full Name (Last, First, Middle Initial)

Brian J Robbins

Mailing Address 610 W Ash St Ste 1800

City State Zip Code  
San Diego CA 92101-3349

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11678

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2100.00

SUBTOTAL of Disbursements This Page (optional) .....

6500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Block

Mailing Address 63 Sterling Rd

City State Zip Code  
Greenwich CT 06831-2627

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11679

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Anthony H Gair

Mailing Address 140 Riverside Dr

City State Zip Code  
New York NY 10024-2605

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11680

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Sunny Smith

Mailing Address 15908 Chateau Ave

City State Zip Code  
Austin TX 78734-2639

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11681

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Shelton Smith

Mailing Address 15908 Chateau Ave

City Austin State TX Zip Code 78734-2639

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11682

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert B Ramsey

Mailing Address 175 Sweetbriar Ln

City Kirkwood State MO Zip Code 63122-5145

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11683

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Thomas J Principe

Mailing Address 207 Brookville Rd

City Glen Head State NY Zip Code 11545-3330

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11684

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 159 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Christopher J Hickey

Mailing Address 20152 Westhaven Ln

City Rocky River State OH Zip Code 44116-4056

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11685

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
James A Morris, Jr

Mailing Address 11632 Musket Rim St

City Austin State TX Zip Code 78738-6600

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11686

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Irene M Principe

Mailing Address 207 Brookville Rd

City Glen Head State NY Zip Code 11545-3330

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 160 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Brent W Coon

Mailing Address 3550 Fannin St

City State Zip Code  
Beaumont TX 77701-3805

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11688

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Thomas A Moore

Mailing Address 1133 5th Ave

City State Zip Code  
New York NY 10128-0123

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11689

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Berris

Mailing Address 35313 Quartermare Cir

City State Zip Code  
Solon OH 44139-2469

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11690

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5200.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 161 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Craig Bashein

Mailing Address 2894 Nottingham Ln

City State Zip Code  
Chagrin Falls OH 44022-6694

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11691

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Sheila G Umphrey

Mailing Address 21 Avenue of The Oaks

City State Zip Code  
Beaumont TX 77707-1801

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11692

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
James J Ross

Mailing Address 770 Park Ave

City State Zip Code  
New York NY 10021-4153

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11693

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 162 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William L Smith, II

Mailing Address 309 Cartgate Cir

City Blythewood State SC Zip Code 29016-9239

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11694

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
Laura Ross

Mailing Address 770 Park Ave

City New York State NY Zip Code 10021-4153

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11695

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
G Paul Howes

Mailing Address 14002 Rancho Vista Bnd

City San Diego State CA Zip Code 92130-5248

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11696

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) John P Feroletto	<b>Transaction ID:</b> SB28A-11697 <b>Date of Disbursement</b>																				
Mailing Address 95 North Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Buffalo State NY Zip Code 14209-1022	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Patrick Coughlin	<b>Transaction ID:</b> SB28A-11698 <b>Date of Disbursement</b>																				
Mailing Address 655 W Broadway Ste 1900	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City San Diego State CA Zip Code 92101-8498	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Byron S Georgiou	<b>Transaction ID:</b> SB28A-11699 <b>Date of Disbursement</b>																				
Mailing Address 2747 Paradise Rd Unit 2204	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Las Vegas State NV Zip Code 89109-9066	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 164 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael S Harshman

Mailing Address 6630 Seville Dr

City Canfield State OH Zip Code 44406-8128

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11700

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Terrence P Higgins

Mailing Address 18 Lakeridge Dr  
SOUTH DRIVE

City Orchard Park State NY Zip Code 14127

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11701

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
William K Cavanagh

Mailing Address 133 S Douglas Ave

City Springfield State IL Zip Code 62704-7512

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11702

Date of Disbursement

/   /

Amount of Each Disbursement this Period

950.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 165 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John T Long

Mailing Address 1912 Hamilton Ct

City Springfield State IL Zip Code 62704-3411

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11703

Date of Disbursement

/   /

Amount of Each Disbursement this Period

950.00

**B.**

Full Name (Last, First, Middle Initial)  
Janice M Arnold-Roach

Mailing Address 2107 37th St NW

City Canton State OH Zip Code 44709-2305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11704

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michele M Bashein

Mailing Address 2894 Nottingham Ln

City Chagrin Falls State OH Zip Code 44022-6694

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11705

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5550.00

**TOTAL** This Period (last page this line number only) .....

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	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Lynn M Meredith <hr/> Mailing Address      70 Pascal Ln <hr/> City Austin                                  State TX                                  Zip Code 78746-2552 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House                                  Disbursement For:      2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                                  District:	<b>Transaction ID:</b> SB28A-11706 Date of Disbursement <div style="text-align: center;"> <span style="border: 1px solid black; padding: 2px 5px;"><small>M</small> <small>M</small></span> /  <span style="border: 1px solid black; padding: 2px 5px;"><small>D</small> <small>D</small></span> /  <span style="border: 1px solid black; padding: 2px 5px;"><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></span> </div> <div style="text-align: center;"> <span style="border: 1px solid black; padding: 2px 5px;">03</span> /  <span style="border: 1px solid black; padding: 2px 5px;">24</span> /  <span style="border: 1px solid black; padding: 2px 5px;">2008</span> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; height: 20px; width: 100%; text-align: right; padding-right: 10px;">2300.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas J Meredith <hr/> Mailing Address      70 Pascal Ln <hr/> City Austin                                  State TX                                  Zip Code 78746-2552 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House                                  Disbursement For:      2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                                  District:	<b>Transaction ID:</b> SB28A-11707 Date of Disbursement <div style="text-align: center;"> <span style="border: 1px solid black; padding: 2px 5px;"><small>M</small> <small>M</small></span> /  <span style="border: 1px solid black; padding: 2px 5px;"><small>D</small> <small>D</small></span> /  <span style="border: 1px solid black; padding: 2px 5px;"><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></span> </div> <div style="text-align: center;"> <span style="border: 1px solid black; padding: 2px 5px;">03</span> /  <span style="border: 1px solid black; padding: 2px 5px;">24</span> /  <span style="border: 1px solid black; padding: 2px 5px;">2008</span> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; height: 20px; width: 100%; text-align: right; padding-right: 10px;">2300.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) J Dennis Weitzel <hr/> Mailing Address      5005 Oak Lawn Ave Ste 1100 <hr/> City Dallas                                  State TX                                  Zip Code 75201 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House                                  Disbursement For:      2008 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State:                                  District:	<b>Transaction ID:</b> SB28A-11708 Date of Disbursement <div style="text-align: center;"> <span style="border: 1px solid black; padding: 2px 5px;"><small>M</small> <small>M</small></span> /  <span style="border: 1px solid black; padding: 2px 5px;"><small>D</small> <small>D</small></span> /  <span style="border: 1px solid black; padding: 2px 5px;"><small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></span> </div> <div style="text-align: center;"> <span style="border: 1px solid black; padding: 2px 5px;">03</span> /  <span style="border: 1px solid black; padding: 2px 5px;">24</span> /  <span style="border: 1px solid black; padding: 2px 5px;">2008</span> </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; height: 20px; width: 100%; text-align: right; padding-right: 10px;">2100.00</div>
<div style="display: flex; justify-content: space-between;"> <div> <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶ </div> <div style="border: 1px solid black; width: 200px; text-align: right; padding: 5px;">6700.00</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div> <b>TOTAL</b> This Period (last page this line number only) ..... ▶ </div> <div style="border: 1px solid black; width: 200px; height: 30px;"></div> </div>	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Rita Rand

Mailing Address 730 Park Ave

City State Zip Code  
New York NY 10021-4945

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11709

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mitchell Berger

Mailing Address 7121 NW 65th Ter

City State Zip Code  
Parkland FL 33067-1437

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11710

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jim Van Camp

Mailing Address PO Box 1389

City State Zip Code  
Pinehurst NC 28370-1389

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11711

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 168 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Karl Knudsen

Mailing Address PO Box 2372

City Raleigh State NC Zip Code 27602-2372

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11712

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephen M Lore

Mailing Address 2795 Wyngate Dr NW

City Atlanta State GA Zip Code 30305-2852

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11713

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2350.00

**C.**

Full Name (Last, First, Middle Initial)  
Loren Kieve

Mailing Address 2655 Steiner St

City San Francisco State CA Zip Code 94115-1141

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11714

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6950.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 169 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Trapani

Mailing Address 102 Huntington Dr

City State Zip Code  
Chapel Hill NC 27514-2416

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11715

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Kevin A Trapani

Mailing Address 102 Huntington Dr

City State Zip Code  
Chapel Hill NC 27514-2416

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11716

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Ms Nancy W Bozarth

Mailing Address 1310 Legacy Ln

City State Zip Code  
Wilmington NC 28411-9276

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

C Mark Holt

Mailing Address 1314 Canterbury Rd

City Raleigh State NC Zip Code 27608-1902

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11719

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

James B Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513-5559

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11720

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

William Joslin

Mailing Address 2431 W Lake Dr

City Raleigh State NC Zip Code 27609-7656

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11721

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Caitlin Trapani Mailing Address 102 Huntington Dr	<b>Transaction ID:</b> SB28A-11722 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
City State Zip Code Chapel Hill NC 27514-2416 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2300.00</td> </tr> </table> Category/ Type	2300.00																				
2300.00																						
<b>B.</b> Full Name (Last, First, Middle Initial) Marla Turlington Mailing Address 1212 Westmoreland Dr City State Zip Code Raleigh NC 27612-4735 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-11723 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2300.00</td> </tr> </table> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2300.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
2300.00																						
<b>C.</b> Full Name (Last, First, Middle Initial) Cheryl Wolff Mailing Address PO Box 8578 City State Zip Code Asheville NC 28814-8578 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-11724 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1140.00</td> </tr> </table> Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	1140.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
1140.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

**5740.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 172 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David L Saussy, Jr

Mailing Address 306 Glendale Dr

City State Zip Code  
Chapel Hill NC 27514-5914

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11725

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kimberly Heavner Saussy

Mailing Address 306 Glendale Dr

City State Zip Code  
Chapel Hill NC 27514-5914

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11726

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Dorothy C Bernholz

Mailing Address 1202 Roosevelt Dr

City State Zip Code  
Chapel Hill NC 27514-3311

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11727

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

David B Lakey

Mailing Address 1617 Stonehurst Rd

City Raleigh State NC Zip Code 27607-4834

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11728

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Sandy Lakey

Mailing Address 1617 Stonehurst Rd

City Raleigh State NC Zip Code 27607-4834

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11729

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Ben Anderson

Mailing Address 1360 W 9th St Ste 200

City Cleveland State OH Zip Code 44113-1254

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11730

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Tashery Otway-Smithers</p> <p>Mailing Address 1031 Albee Farm Rd</p> <p>City Venice State FL Zip Code 34285-6283</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-11731</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) William R Rice</p> <p>Mailing Address PO Box 5222</p> <p>City Ellsworth State ME Zip Code 04605-5222</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-11732</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 750.00</p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) Nan Troiano</p> <p>Mailing Address PO Box 493</p> <p>City Arley State AL Zip Code 35541-0493</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-11733</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 300.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Harry F Bell

Mailing Address 1235 Upper Ridgeway Rd

City Charleston State WV Zip Code 25314-1427

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11734

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Carlton Mansfield

Mailing Address PO Box 3299

City Pembroke State NC Zip Code 28372-3299

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11735

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David McClain

Mailing Address 95 Inverleith Ter

City Piedmont State CA Zip Code 94611-3322

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11736

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Charles M Sasser

Mailing Address 1011 E Morehead St  
Ste 350

City Charlotte State NC Zip Code 28204-2890

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Marion T Smith

Mailing Address 4201 Cathedral Ave NW  
Apt 1420W

City Washington State DC Zip Code 20016-4969

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11738

Date of Disbursement

/   /

Amount of Each Disbursement this Period

175.00

**C.**

Full Name (Last, First, Middle Initial)

Merilyn Wong

Mailing Address 95 Inverleith Ter

City Piedmont State CA Zip Code 94611-3322

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4575.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 177 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Patricia Merrill

Mailing Address 2512 9th Ave W

City State Zip Code  
Seattle WA 98119-2523

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11740

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas Palazzolo

Mailing Address 839 Fairdale Ave

City State Zip Code  
Saint Louis MO 63119-1219

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11741

Date of Disbursement

/   /

Amount of Each Disbursement this Period

890.66

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Hogan

Mailing Address 543 S Muirfield Rd

City State Zip Code  
Los Angeles CA 90020-4825

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11742

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3264.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Brian Loncar

Mailing Address 4408 Arcady Ave

City Dallas State TX Zip Code 75205-3605

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11743

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Marie E Collins

Mailing Address 609 Westfield Ln

City Friendswood State TX Zip Code 77546-6322

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Sue Loncar

Mailing Address 4408 Arcady Ave

City Dallas State TX Zip Code 75205-3605

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Darren J Robbins

Mailing Address 10833 Stone Haven Way

City San Diego State CA Zip Code 92130-4814

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11746

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kimberly K Robbins

Mailing Address 10833 Stone Haven Way

City San Diego State CA Zip Code 92130-4814

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11747

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
George E Barrett

Mailing Address 217 2nd Ave N

City Nashville State TN Zip Code 37201-1601

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11748

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michelle M Ciccarelli

Mailing Address 9776 La Jolla Farms Rd

City State Zip Code  
La Jolla CA 92037-1133

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11749

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Frank Daniels, Jr

Mailing Address 1515 Glenwood Ave

City State Zip Code  
Raleigh NC 27608-2337

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11750

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Elizabeth Reding Gambrell

Mailing Address 4545 Bordeaux Ave

City State Zip Code  
Dallas TX 75205-3608

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11751

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James D Cooney

Mailing Address 4404 Pendale Rd

City Charlotte State NC Zip Code 28210-4342

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11752

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Janet S Cafaro

Mailing Address 600 Warner Rd

City Hubbard State OH Zip Code 44425-2729

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11753

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Bruce Broillet

Mailing Address 773 Stradella Rd

City Los Angeles State CA Zip Code 90077-3307

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11754

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Christine Spagnoli	<b>Transaction ID:</b> SB28A-11755 <b>Date of Disbursement</b>																				
Mailing Address 1303 Hill St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Santa Monica State CA Zip Code 90405-4723	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Richard A Sayles	<b>Transaction ID:</b> SB28A-11756 <b>Date of Disbursement</b>																				
Mailing Address 3728 Princess Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Dallas State TX Zip Code 75229-5230	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2200.00</td> </tr> </table>	2200.00																			
2200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kenneth S Canfield	<b>Transaction ID:</b> SB28A-11757 <b>Date of Disbursement</b>																				
Mailing Address 1355 Peachtree St NE Ste 1600	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Atlanta State GA Zip Code 30309-3276	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Joan Baron

Mailing Address 5412 Emerson Ave

City Dallas State TX Zip Code 75209-5006

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-11758

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Sylvia M Demarest

Mailing Address 1812 Atlantic St

City Dallas State TX Zip Code 75208-3002

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-11759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

C Brooks Cutter

Mailing Address 3187 Barberry Ln

City Sacramento State CA Zip Code 95864-5017

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-11760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 184 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Curtis E Clinesmith

Mailing Address 1509 Valley Creek Rd

City Denton State TX Zip Code 76205-7579

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11761

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Maritza Block

Mailing Address 63 Sterling Rd

City Greenwich State CT Zip Code 06831-2627

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11762

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mike C Miller

Mailing Address 2805 Palm Plz

City Marshall State TX Zip Code 75672-7664

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11763

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6100.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 185 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ione Cutter

Mailing Address 3187 Barberry Ln

City Sacramento State CA Zip Code 95864-5017

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11764

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Howard S Herschenhorn

Mailing Address 2 Clover Dr

City Great Neck State NY Zip Code 11021-1801

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11765

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)

Christopher B Dolan

Mailing Address 78 1st St

City San Francisco State CA Zip Code 94105-2507

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11766

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 186 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Stuart Talley

Mailing Address 409 36th Way

City Sacramento State CA Zip Code 95816-3407

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11767

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

B.

Full Name (Last, First, Middle Initial)  
Frederick M Baron

Mailing Address 5950 Deloache Ave

City Dallas State TX Zip Code 75225-3005

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11768

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Donald W Buckler

Mailing Address 5012 W The Riviera St

City Tampa State FL Zip Code 33609-3613

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 187 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Angela Buckler

Mailing Address 5012 W The Riviera St

City Tampa State FL Zip Code 33609-3613

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11770

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)

Carmine A Rubino

Mailing Address 115 Powell Ave

City Rockville Centre State NY Zip Code 11570-3035

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11771

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr Matthew Marc Gaier

Mailing Address 8 E Lake Dr

City Katonah State NY Zip Code 10536-3501

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11772

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 188 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lynda Rubino

Mailing Address 115 Powell Ave

City State Zip Code  
Rockville Centre NY 11570-3035

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11773

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Arthur Luxenberg

Mailing Address 180 Maiden Ln Fl 17

City State Zip Code  
New York NY 10038-5023

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11774

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**C.**

Full Name (Last, First, Middle Initial)  
Lisa Baron

Mailing Address 5950 Deloache Ave

City State Zip Code  
Dallas TX 75225-3005

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11775

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Julius Chambers

Mailing Address 7005 Tega Cay Dr

City State Zip Code  
Fort Mill SC 29708-9343Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11776

Date of Disbursement

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

650.00

B.

Full Name (Last, First, Middle Initial)  
Peter A Kraus

Mailing Address 4906 Shadywood Ln

City State Zip Code  
Dallas TX 75209-2024Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11777

Date of Disbursement

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Jeffrey Hoffman

Mailing Address 6324 Waggoner Dr

City State Zip Code  
Dallas TX 75230-4016Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11778

Date of Disbursement

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

1300.00

SUBTOTAL of Disbursements This Page (optional) ▶

4250.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 190 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Cheryl Rhodes Pope

Mailing Address 5948 Elderwood Dr

City State Zip Code  
Dallas TX 75230-3454

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11779

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey B Simon

Mailing Address 2812 Daniel Ave

City State Zip Code  
Dallas TX 75205-1514

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1100.00

**C.**

Full Name (Last, First, Middle Initial)

Paul J Geller

Mailing Address 120 E Palmetto Park Rd Ste 500

City State Zip Code  
Boca Raton FL 33432-4809

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11781

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Leslie Geller

Mailing Address 120 E Palmetto Park Rd Ste 500

City State Zip Code  
Boca Raton FL 33432-4809

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11782

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Eric J Ratinoff

Mailing Address 631 Crocker Rd

City State Zip Code  
Sacramento CA 95864-5609

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11783

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Anne Kieve

Mailing Address 2655 Steiner St

City State Zip Code  
San Francisco CA 94115-1141

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11784

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Paul F Shanahan

Mailing Address 4 Stefenage Ct

City Pittsford State NY Zip Code 14534-1876

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11785

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

B.

Full Name (Last, First, Middle Initial)  
Mr Allen Schulman

Mailing Address 236 3rd St NW

City Canton State OH Zip Code 44702-1518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11786

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Christine Schulman

Mailing Address 236 3rd St SW

City Canton State OH Zip Code 44702-1607

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11787

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Janine P Lycan

Mailing Address 4757 Bentwood Dr

City State Zip Code  
Brooklyn OH 44144-3154

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11788

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Paul W Flowers

Mailing Address 3249 Belvoir Blvd

City State Zip Code  
Beachwood OH 44122-3827

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11789

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Pam Heavner

Mailing Address 719 Gimghoul Rd

City State Zip Code  
Chapel Hill NC 27514-3814

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11790

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 194 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jane m Clark

Mailing Address 1 Cliff Court Ext

City Southern Pines State NC Zip Code 28387-6480

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11791

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jennifer Coltrain

Mailing Address 2608 Cromwell Rd

City Raleigh State NC Zip Code 27608-1346

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11792

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)  
Noah B Abrams

Mailing Address 490 Barnett Shoals Rd

City Athens State GA Zip Code 30605-7627

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11793

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 195 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Marvin K Blount, III

Mailing Address 311 Middleton Pl

City Greenville State NC Zip Code 27858-3739

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11794

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Kricorian

Mailing Address 44 Morningside Dr # 31

City New York State NY Zip Code 10025-1719

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11795

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Cherida Smith

Mailing Address 727 Los Palos Dr

City Lafayette State CA Zip Code 94549-5356

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

850.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 196 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kathy Bergin

Mailing Address 1301 Briar Woods Ln

City Danbury State CT Zip Code 06810-7257

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11797

Date of Disbursement

/   /

Amount of Each Disbursement this Period

179.00

**B.**

Full Name (Last, First, Middle Initial)  
Anne Blitstein

Mailing Address 180 E Pearson St

City Chicago State IL Zip Code 60611-2130

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11798

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1054.00

**C.**

Full Name (Last, First, Middle Initial)  
Harriet Barlow

Mailing Address 2015 Irving Ave S

City Minneapolis State MN Zip Code 55405-2521

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11799

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1383.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 197 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joan Rust

Mailing Address 3724 N Camino Leamaria

City Tucson State AZ Zip Code 85716-0800

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11800

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)  
James L Scotton

Mailing Address 4335 Rader Dr

City Climax State NC Zip Code 27233-9703

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11802

Date of Disbursement

/   /

Amount of Each Disbursement this Period

104.00

**C.**

Full Name (Last, First, Middle Initial)  
Terry Grossman

Mailing Address 10866 Wilshire Blvd Fl 10

City Los Angeles State CA Zip Code 90024-4350

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11803

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1210.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1439.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 198 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ruth Adar

Mailing Address 6114 La Salle Ave # 411

City  
Oakland

State  
CA

Zip Code  
94611-2802

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11804

Date of Disbursement

/   /

Amount of Each Disbursement this Period

222.54

**B.**

Full Name (Last, First, Middle Initial)

Barbara Miliaras

Mailing Address 12 Mount Pleasant St

City  
Winchester

State  
MA

Zip Code  
01890-3034

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11805

Date of Disbursement

/   /

Amount of Each Disbursement this Period

225.00

**C.**

Full Name (Last, First, Middle Initial)

John L Schoo

Mailing Address PO Box 1793

City  
Blowing Rock

State  
NC

Zip Code  
28605-1793

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11806

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2747.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 199 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ms Cheri Shanker

Mailing Address 6345 Balboa Blvd

City Encino State CA Zip Code 91316-1519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11807

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Eileen Collard

Mailing Address 4412 47th Ave S

City Minneapolis State MN Zip Code 55406-3623

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11808

Date of Disbursement

/   /

Amount of Each Disbursement this Period

394.53

**C.**

Full Name (Last, First, Middle Initial)

Rowan Wilson

Mailing Address 60 Reid Ave

City Port Washington State NY Zip Code 11050-3508

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11809

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4994.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 200 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffrey Lamkin	<b>Transaction ID:</b> SB28A-11810 <b>Date of Disbursement</b>																				
Mailing Address 2963 Hudson Aurora Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Hudson State OH Zip Code 44236-2421	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Jeannette Russell	<b>Transaction ID:</b> SB28A-11811 <b>Date of Disbursement</b>																				
Mailing Address 437 Beaver St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Sewickley State PA Zip Code 15143-1543	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">270.00</td> </tr> </table>	270.00																			
270.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Alan Gordon	<b>Transaction ID:</b> SB28A-11812 <b>Date of Disbursement</b>																				
Mailing Address 300 Central Park W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10024-1513	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">119.53</td> </tr> </table>	119.53																			
119.53																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**639.53**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 201 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Gabrielle Cassou

Mailing Address 57 E 78th St

City State Zip Code  
New York NY 10021

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11813

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark A Chavez

Mailing Address 42 Miller Ave

City State Zip Code  
Mill Valley CA 94941-1904

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Evan E Torgan

Mailing Address 140 Broadway Fl 36

City State Zip Code  
New York NY 10005-1119

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11815

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 203 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Steven M Campora

Mailing Address 11251 Golden Eagle Dr

City State Zip Code  
Auburn CA 95602-7620

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11819

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
Alfred C Pfeiffer

Mailing Address 619 Mariposa Ave

City State Zip Code  
Oakland CA 94610-1312

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11820

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Dorine Streeter

Mailing Address 3125 Claremont Ave

City State Zip Code  
Berkeley CA 94705-2707

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11821

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 204 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert J Nelson

Mailing Address 1011 Greenhill Rd

City State Zip Code  
Mill Valley CA 94941-3498

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**B.**

Full Name (Last, First, Middle Initial)  
Stuart Smits

Mailing Address 166 Mills Rd

City State Zip Code  
Sacramento CA 95864-5648

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
Nadine North

Mailing Address 8 Iris Ln

City State Zip Code  
San Carlos CA 94070-1549

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11824

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 205 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Lori Sarkisian Taylor Mailing Address 230 Bonita Ave	<b>Transaction ID:</b> SB28A-11825 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Piedmont CA 94611-4007 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2100.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) James E Butler, Jr Mailing Address PO Box 2766 City State Zip Code Columbus GA 31902-2766 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-11826 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Edward S Cook Mailing Address 910 Taylor Pkwy City State Zip Code Suwanee GA 30024-4245 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-11827 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 206 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

LeeAnn T Bartz

Mailing Address 5902 Rolston Rd

City State Zip Code  
Bethesda MD 20817-3447

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11828

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Adrianne Babbitt

Mailing Address 5333 Pennock Point Rd

City State Zip Code  
Jupiter FL 33458-3406

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11829

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Theodore Babbitt

Mailing Address 5333 Pennock Point Rd

City State Zip Code  
Jupiter FL 33458-3406

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11830

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 207 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Mr Brent M Rosenthal

Mailing Address 6617 Lakewood Blvd

City Dallas State TX Zip Code 75214-3748

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11831

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

James H Nance

Mailing Address 150 Poinciana Dr

City Indian Harbour Bea State FL Zip Code 32937-4437

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11832

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2100.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth K Nance

Mailing Address 525 N. Harbor Beach Blvd.

City Melbane State FL Zip Code 32935

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11833

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

6700.00

TOTAL This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

2300.00

2300.00

2100.00

FEC Schedule B ( Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 209 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Q Bird

Mailing Address 2170 Defoor Hills Rd NW

City Atlanta State GA Zip Code 30318-2202

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11837

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kathy-Ann Webb Marlin

Mailing Address 3550 Crystal Ct

City Miami State FL Zip Code 33133-4036

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11838

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
James C Sturdevant

Mailing Address 185 El Cerrito Ave

City San Rafael State CA Zip Code 94901-1966

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11839

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 210 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lewis B Freeman

Mailing Address 3225 Aviation Ave Ste 501

City State Zip Code  
Miami FL 33133-4741

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11840

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth Cabraser

Mailing Address 275 Battery St

City State Zip Code  
San Francisco CA 94111-3305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11841

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
William Bernstein

Mailing Address 20 Jacklyn Ter

City State Zip Code  
Mill Valley CA 94941-3002

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11842

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 211 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Cassandra B Bernstein

Mailing Address 20 Jacklyn Ter

City State Zip Code  
Mill Valley CA 94941-3002

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11843

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Tabacco, Jr

Mailing Address 425 California St Ste 2100

City State Zip Code  
San Francisco CA 94104-2206

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11844

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
James M Finberg

Mailing Address 2360 Broadway St

City State Zip Code  
San Francisco CA 94115-1234

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11845

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Melanie Piech

Mailing Address 2360 Broadway St

City State Zip Code  
San Francisco CA 94115-1234

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11846

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Todd Schneider

Mailing Address 41 Madrone Ave

City State Zip Code  
Larkspur CA 94939-2111

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11847

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul V Kilpatrick, Jr

Mailing Address 1603 Elmwood Dr

City State Zip Code  
Columbus GA 31906-3547

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11848

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 214 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sotiris K Kolokotronis

Mailing Address 560 Rodante Way

City Sacramento State CA Zip Code 95864-7235

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11852

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Diane Duffy

Mailing Address 12 Storyland Rd

City Saint James State NY Zip Code 11780-3124

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11853

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Francis M Letro

Mailing Address 90 Chapin Pkwy

City Buffalo State NY Zip Code 14209-1102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11854

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 215 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey C Anderson

Mailing Address 9601 McAllister Fwy

City San Antonio State TX Zip Code 78216-4681

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11855

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles S Paul

Mailing Address 1003 Wallace Rdg

City Beverly Hills State CA Zip Code 90210-2635

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11856

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Van Fletcher

Mailing Address 1003 Wallace Rdg

City Beverly Hills State CA Zip Code 90210-2635

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11857

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 216 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lynne Wasserman

Mailing Address 514 Doheny Rd

City State Zip Code  
Beverly Hills CA 90210-2922

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11858

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kevin D Wendle

Mailing Address 9633 Beverlywood St

City State Zip Code  
Los Angeles CA 90034-1824

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11859

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Sharone Blue

Mailing Address 1725 Redbourne Dr

City State Zip Code  
Atlanta GA 30350-5642

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11860

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 217 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Esti Blue

Mailing Address 1725 Redbourne Dr

City Atlanta State GA Zip Code 30350-5642

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11861

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Claire H Blumenthal

Mailing Address 4649 Village Dr

City Atlanta State GA Zip Code 30338-5742

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11862

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Walter G Campbell, Jr

Mailing Address 1844 Colonial Dr

City Coral Springs State FL Zip Code 33071-7809

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11863

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 218 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sidney Sheinberg

Mailing Address 1158 Tower Rd

City State Zip Code  
Beverly Hills CA 90210-2131

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11864

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lorraine Sheinberg

Mailing Address 1158 Tower Rd

City State Zip Code  
Beverly Hills CA 90210-2131

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11865

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
William A Brown

Mailing Address 437 Sheraton Dr

City State Zip Code  
San Antonio TX 78209-5435

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11866

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 219 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Edward W Allred

Mailing Address 234 Tophill Rd

City San Antonio State TX Zip Code 78209-3444

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11867

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
Terence J O'Reilly

Mailing Address 1900 Ofarrell St Ste 360

City San Mateo State CA Zip Code 94403-1329

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11868

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**C.**

Full Name (Last, First, Middle Initial)  
Joel Fineberg

Mailing Address 3811 Turtle Creek Blvd  
Ste 1900

City Dallas State TX Zip Code 75219-4545

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 220 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
F Richard Blue

Mailing Address 6100 Lake Forrest Dr NW  
Ste 510

City Atlanta State GA Zip Code 30328-3837

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11870

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Judith N Bonior

Mailing Address 52 Belleview St

City Mount Clemens State MI Zip Code 48043-2241

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11871

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
John D Gehlhausen

Mailing Address 312 W Olive St

City Lamar State CO Zip Code 81052-2746

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11872

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

25.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4625.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Aaron H Simon

Mailing Address 465 Gentry Ct

City Walnut Creek State CA Zip Code 94598-1864

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11873

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Jane B Stranch

Mailing Address 8060 Poplar Creek Rd

City Nashville State TN Zip Code 37221-3225

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Sol Blumenthal

Mailing Address 647 E Paces Ferry Rd NE

City Atlanta State GA Zip Code 30305-2762

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11875

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 222 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Daniel P O'Toole

Mailing Address 535 Summit Ave

City State Zip Code  
Oradell NJ 07649-1327

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Debbie Malone

Mailing Address 7470 Wildercliff Dr NW

City State Zip Code  
Atlanta GA 30328-1144

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11877

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Connie Jason

Mailing Address 2635 Stonelake Dr Apt 316

City State Zip Code  
Grand Prairie TX 75050-8799

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11878

Date of Disbursement

/   /

Amount of Each Disbursement this Period

42.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4642.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

J Griffin Morgan

Mailing Address 121 Cascade Ave

City  
Winston Salem

State  
NC

Zip Code  
27127-2026

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11879

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Lucius Bunton

Mailing Address 712 W 14th St

City  
Austin

State  
TX

Zip Code  
78701-1754

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Maureen Geraghty

Mailing Address 121 Cascade Avenue

City  
Winston-Salem

State  
NC

Zip Code  
27101

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11881

Date of Disbursement

/   /

Amount of Each Disbursement this Period

825.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3475.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James Stallings

Mailing Address 104 Bridgegate Dr

City State Zip Code  
Cary NC 27519-7183

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11882

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Milton McGregor

Mailing Address 1506 S Perry St

City State Zip Code  
Montgomery AL 36104-5604

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11883

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Jane H Allen

Mailing Address 3101 Pinehurst Dr

City State Zip Code  
Montgomery AL 36111-1118

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11884

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

J Greg Allen

Mailing Address 3101 Pinehurst Dr

City State Zip Code  
Montgomery AL 36111-1118

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11885

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Steve Raby

Mailing Address 1603 Greenwyche Rd SE

City State Zip Code  
Huntsville AL 35801-2111

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11886

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)

Andy D Birchfield, Jr

Mailing Address 9813 Wynchase Cir

City State Zip Code  
Montgomery AL 36117-5185

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11887

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Danna G Hamilton

Mailing Address PO Box 133  
80 hamilton dr

City State Zip Code  
Thelma KY 41260-0133

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11888

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
William M Murphy

Mailing Address 800 Riviera Isle Dr

City State Zip Code  
Ft Lauderdale FL 33301-2622

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11889

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Amelia Rea Maguire

Mailing Address 2715 Toledo St

City State Zip Code  
Coral Gables FL 33134-4857

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11890

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 227 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey Conett Kirby

Mailing Address 2405 Mtn Vista Dr

City Birmingham State AL Zip Code 35243-2856

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11891

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
James D Turner, Jr

Mailing Address 934 Conroy Rd

City Birmingham State AL Zip Code 35222-4425

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11892

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)  
Verlyn Calhoun

Mailing Address 8668 Wynford Place

City Montgomery State AL Zip Code 36117

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11893

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 228 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Deanne R Jones Mailing Address 9272 Gainswood	<b>Transaction ID:</b> SB28A-11894 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Montgomery AL 36117-5120 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1450.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Barrie H Harmon, III Mailing Address 3400 Bankhead Ave City State Zip Code Montgomery AL 36111-1349 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-11895 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Edgar C Gentle, III Mailing Address 710 Sunset Dr City State Zip Code Pell City AL 35125-3437 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-11896 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>800.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4550.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Giles G Perkins

Mailing Address 24 Ridge Dr

City Birmingham State AL Zip Code 35213-3632

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11897

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jere L Beasley

Mailing Address 1000 Ray Thorington Rd

City Montgomery State AL Zip Code 36117-8808

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11898

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary Joslin

Mailing Address 2431 W Lake Dr

City Raleigh State NC Zip Code 27609-7656

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11899

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 230 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ms Judy Hunt

Mailing Address PO Box 1526

City Blowing Rock State NC Zip Code 28605-1526

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11900

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard Bashein

Mailing Address 7590 Thistle Ln

City Russell State OH Zip Code 44072-9500

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Randolph M James

Mailing Address PO Box 20069

City Winston Salem State NC Zip Code 27120-0069

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11902

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Jones P Byrd

Mailing Address 89 Edgelawn Rd

City Asheville State NC Zip Code 28804-1507

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11903

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
John Tally

Mailing Address 173 Ellerslie Dr

City Fayetteville State NC Zip Code 28303-5918

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11904

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Ms Mary Ann Tally

Mailing Address 173 Ellerslie Dr

City Fayetteville State NC Zip Code 28303-5918

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11905

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

6900.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 232 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Albeon G Anderson, Jr

Mailing Address 104 Bramblebush Ct

City Rocky Mount State NC Zip Code 27804-2152

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11906

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Leonard T Jernigan

Mailing Address 1206 Marlowe Rd

City Raleigh State NC Zip Code 27609-6348

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11907

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

James B Hunt, Jr

Mailing Address 6653D Governor Hunt Rd

City Lucama State NC Zip Code 27851-9415

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11908

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Brian D Katz

Mailing Address 820 Okeefe Ave

City State Zip Code  
New Orleans LA 70113-1125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11909

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Edward Massey

Mailing Address 509 Church St

City State Zip Code  
Mobile AL 36602-2004

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11910

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven J Lane

Mailing Address 820 Okeefe Ave

City State Zip Code  
New Orleans LA 70113-1125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11911

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Janet B Crawford

Mailing Address 7323 Bocage Blvd

City State Zip Code  
Baton Rouge LA 70809-1128

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11912

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)

Mona Lisa Wallace

Mailing Address 1101 Sumter Ct

City State Zip Code  
Salisbury NC 28144-2868

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11913

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Sumwalt

Mailing Address 1341 E Morehead St Ste 101

City State Zip Code  
Charlotte NC 28204-2936

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11914

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ray F Peck, Jr

Mailing Address 10709 Brass Kettle Rd

City Raleigh State NC Zip Code 27614-9599

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11915

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Burley Mitchell

Mailing Address 4301 City of Oaks Wynd

City Raleigh State NC Zip Code 27612-5316

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11916

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

William H Holdford

Mailing Address 1137 Woodland Dr NW

City Wilson State NC Zip Code 27893-2123

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11917

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 236 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Nathaniel C Stinnett

Mailing Address 1569 Beacon St Apt 53

City State Zip Code  
Brookline MA 02446-4613

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11918

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephen J Herman

Mailing Address 841 Amethyst St

City State Zip Code  
New Orleans LA 70124-3603

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11919

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen P Bruno

Mailing Address 855 Baronne St

City State Zip Code  
New Orleans LA 70113-1102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11920

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 237 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
J Burton LeBlanc, IV

Mailing Address 3125 McCarroll Dr

City State Zip Code  
Baton Rouge LA 70809-1514

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11921

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Joseph J McKernan

Mailing Address 8710 Jefferson Hwy

City State Zip Code  
Baton Rouge LA 70809-2233

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11922

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Diane Mckernan

Mailing Address 8710 Jefferson Hwy

City State Zip Code  
Baton Rouge LA 70809-2233

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11923

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

1900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 238 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ms Bridget Badon

Mailing Address 296 Glen Dee Rd

City Aspen State CO Zip Code 81611-3364

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11924

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Kenneth E Badon

Mailing Address 296 Glen Dee Rd

City Aspen State CO Zip Code 81611-3364

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11925

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Strauss Zelnick

Mailing Address 115 E 67th St Apt 9-10C

City New York State NY Zip Code 10065-5951

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11926

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 239 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Leo J Hindery, Jr

Mailing Address 188 E 78th St Apt 31B

City State Zip Code  
New York NY 10021-0406

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11927

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Hunter W Lundy

Mailing Address PO Box 3010

City State Zip Code  
Lake Charles LA 70602-3010

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11928

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Kathryn A Coleman

Mailing Address 300 E 56th St Apt 12J

City State Zip Code  
New York NY 10022-4138

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11929

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 240 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mark J Coleman

Mailing Address 300 E 56th St Apt 12J

City State Zip Code  
New York NY 10022-4138

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11930

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Jon Silvan

Mailing Address 53 N Moore St

City State Zip Code  
New York NY 10013-2314

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11931

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Lucas A Ferrara

Mailing Address PO Box 3387

City State Zip Code  
New York NY 10008-3387

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11932

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joel Wooten

Mailing Address 7235 Leighton Rd

City Columbus State GA Zip Code 31904-1939

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11933

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert B Teilhet

Mailing Address 2946 Anderson Cir SE

City Smyrna State GA Zip Code 30080-3623

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11934

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
John Steel

Mailing Address 1035 W Wesley Rd NW

City Atlanta State GA Zip Code 30327-1311

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11935

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Geoffrey E Pope

Mailing Address 817 Adair Ave NE

City Atlanta State GA Zip Code 30306-3705

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11936

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Troy S Colbert

Mailing Address 1948 Graham St

City Montgomery State AL Zip Code 36106-1830

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11937

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Judith E Purvis

Mailing Address 1601 Old Orchard Rd

City Vincennes State IN Zip Code 47591-5042

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11938

Date of Disbursement

/   /

Amount of Each Disbursement this Period

254.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2254.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Sharon L Swinburne

Mailing Address 1322 Fort Myer Dr  
Apt 911

City State Zip Code  
Arlington VA 22209-3527

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11939

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2008

Amount of Each Disbursement this Period

350.00

B.

Full Name (Last, First, Middle Initial)  
Sally W Hall

Mailing Address 308 Sinegar Pl

City State Zip Code  
Potomac Falls VA 20165-5129

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11940

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2008

Amount of Each Disbursement this Period

800.00

C.

Full Name (Last, First, Middle Initial)  
Mr William B Bystrynski

Mailing Address 109 Windfall Ct

City State Zip Code  
Cary NC 27518-9029

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11941

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Mary Thaler

Mailing Address 5 Leonard Rd

City State Zip Code  
Bronxville NY 10708-1606

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11942

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Richard W Thaler

Mailing Address 5 Leonard Rd

City State Zip Code  
Bronxville NY 10708-1606

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11943

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
John C Shea

Mailing Address 412 Kilmarnock Dr

City State Zip Code  
Richmond VA 23229-7625

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11944

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Frank M Gren

Mailing Address 1327 Windsor Ridge Ln

City Annapolis State MD Zip Code 21409-4670

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11945

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1800.00

**B.**

Full Name (Last, First, Middle Initial)  
Theodore E Stebbins, Jr

Mailing Address 84 Upland Rd

City Brookline State MA Zip Code 02445-7737

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11946

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1800.00

**C.**

Full Name (Last, First, Middle Initial)  
William S Stone

Mailing Address PO Box 226

City Blakely State GA Zip Code 39823-0226

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11947

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Glenn Sturm

Mailing Address 4549 Harris Trl NW

City Atlanta State GA Zip Code 30327-3823

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11948

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

James L Ferraro

Mailing Address 4000 Ponce de Leon Blvd  
Ste 700

City Coral Gables State FL Zip Code 33146-1434

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11950

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Robert T Hall

Mailing Address 308 Sinegar Pl

City Potomac Falls State VA Zip Code 20165-5129

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11951

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David R Oliver, Jr

Mailing Address 3482 N Emerson St

City State Zip Code  
Arlington VA 22207-1855

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11952

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary Ann Hovis

Mailing Address 2700 Green Holly Springs Ct

City State Zip Code  
Oakton VA 22124-1457

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11953

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Charles Zauzig

Mailing Address 12660 Lakeride Dr

City State Zip Code  
Lakeride VA 22192

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11954

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Courtney Van Winkle

Mailing Address 2621 E Weyburn Rd

City Richmond State VA Zip Code 23235-3252

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11955

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

**B.**

Full Name (Last, First, Middle Initial)  
William Soza

Mailing Address 1295 Ballantrae Farm Dr

City Mc Lean State VA Zip Code 22101-3027

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11956

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark J Proctor

Mailing Address 115 Shoreline Dr

City Gulf Breeze State FL Zip Code 32561-4148

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11957

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 249 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Fredric G Levin

Mailing Address 316 S Baylen St

City Pensacola State FL Zip Code 32502-5900

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11958

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert H Hovis, III

Mailing Address 2700 Green Holly Springs Ct

City Oakton State VA Zip Code 22124-1457

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11959

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael J Miller

Mailing Address 105 N Alfred St

City Alexandria State VA Zip Code 22314-3010

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11960

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Stuart Z Grossman

Mailing Address 829 Havana Dr

City Boca Raton State FL Zip Code 33487-4120

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11961

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephen R Leeds

Mailing Address 229 Peachtree St NE  
Ste 2700

City Atlanta State GA Zip Code 30303-1601

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11962

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Wendy Ivie Maher

Mailing Address 914 Lincoln Cir

City Winter Park State FL Zip Code 32789-2519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11963

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mr Steven R Maher

Mailing Address 914 Lincoln Cir

City Winter Park State FL Zip Code 32789-2519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11964

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Ms Michele D Maher

Mailing Address 23231 Palm Canyon Ln # 2

City Malibu State CA Zip Code 90265-4954

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11965

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Von Biberstein, Jr

Mailing Address PO Box 428

City Burgaw State NC Zip Code 28425-0428

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-11966

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Frances Bryan

Mailing Address 607 Aberdeen Dr

City State Zip Code  
Chapel Hill NC 27516-4459

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11967

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David Ross

Mailing Address 180 W 20th St  
Apt 12C

City State Zip Code  
New York NY 10011-3649

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11968

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
James Chastain

Mailing Address 23bis montee du reve

City State Zip Code  
beaulieu sur mer AE 6310

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 253 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert H Hickman

Mailing Address 4445 Willard Ave Ste 1040

City Chevy Chase State MD Zip Code 20815-3694

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11970

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Susan Jenkins

Mailing Address 98 Graymoor Ln

City Olympia Fields State IL Zip Code 60461-1213

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11971

Date of Disbursement

/   /

Amount of Each Disbursement this Period

419.00

**C.**

Full Name (Last, First, Middle Initial)  
Edwina Webster

Mailing Address 220 E Meadow Rd Ste 9

City Eden State NC Zip Code 27288-3444

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11972

Date of Disbursement

/   /

Amount of Each Disbursement this Period

290.10

**SUBTOTAL** of Disbursements This Page (optional) .....

3009.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Watkiss

Mailing Address 2030 Plymouth Street, NW

City Washington State DC Zip Code 20012

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11973

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1179.56

**B.**

Full Name (Last, First, Middle Initial)  
Flora Ninelles

Mailing Address 25 W Highland Dr Apt 3

City Seattle State WA Zip Code 98119-3505

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11974

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1666.10

**C.**

Full Name (Last, First, Middle Initial)  
Deborah Rennels Salkind

Mailing Address 245 Mount Hermon Rd # 332  
Ste M

City Scotts Valley State CA Zip Code 95066-4045

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11975

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5145.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Donna Middlehurst

Mailing Address 4200 Rosemary St

City State Zip Code  
Chevy Chase MD 20815-5218

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11976

Date of Disbursement

/   /

Amount of Each Disbursement this Period

306.10

**B.**

Full Name (Last, First, Middle Initial)  
Michael R Hugo

Mailing Address 1 Catherine Rd

City State Zip Code  
Framingham MA 01701-2701

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11977

Date of Disbursement

/   /

Amount of Each Disbursement this Period

850.00

**C.**

Full Name (Last, First, Middle Initial)  
John W Fugo

Mailing Address 100 Arlen Park Dr

City State Zip Code  
Chapel Hill NC 27516-0433

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11978

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3456.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 256 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ms Sally Couch Vilas

Mailing Address 750 Weaver Dairy Rd Apt 245

City State Zip Code  
Chapel Hill NC 27514-1493

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11979

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)  
R Phillip Hanes, Jr

Mailing Address PO Box 1704

City State Zip Code  
Winston Salem NC 27102-1704

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11980

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mike Papantonio

Mailing Address 316 S Baylen St  
Ste 400

City State Zip Code  
Pensacola FL 32502-5996

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11981

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3125.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 257 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Jason P Rubin

**Transaction ID:** SB28A-11982

Date of Disbursement

/   /

Mailing Address 9229 W Sunset Blvd  
Ste 710

City Los Angeles State CA Zip Code 90069-3407

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

David M Gottesman

**Transaction ID:** SB28A-11983

Date of Disbursement

/   /

Mailing Address 18 Indian Rock Rd

City Nashua State NH Zip Code 03063-1308

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Jean C Gottesman

**Transaction ID:** SB28A-11984

Date of Disbursement

/   /

Mailing Address 18 Indian Rock Rd

City Nashua State NH Zip Code 03063-1308

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 258 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael L Williams

Mailing Address 4970 SW Hewett Blvd

City Portland State OR Zip Code 97221-2205

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11985

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Catherine Reuben

Mailing Address 22 Porter St

City Somerville State MA Zip Code 02143-2311

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11986

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert T Naumes

Mailing Address 1 Avery St Apt 26D

City Boston State MA Zip Code 02111-1026

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11987

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 259 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas R Watson

Mailing Address 200 Newcastle Ave  
po box 1106

City Portsmouth State NH Zip Code 03801-5222

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11988

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Sally F Frasier

Mailing Address PO Box 799

City Tulsa State OK Zip Code 74101-0799

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11989

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Steven A Bernholz

Mailing Address 1202 Roosevelt Dr

City Chapel Hill State NC Zip Code 27514-3311

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11990

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 260 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Stephanie Bruno	<b>Transaction ID:</b> SB28A-11991 <b>Date of Disbursement</b>																				
Mailing Address 1015 S Carrollton Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New Orleans State LA Zip Code 70118-1145	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Laura M Lee	<b>Transaction ID:</b> SB28A-11992 <b>Date of Disbursement</b>																				
Mailing Address 465 Gentry Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Walnut Creek State CA Zip Code 94598-1864	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Carol Leif	<b>Transaction ID:</b> SB28A-11993 <b>Date of Disbursement</b>																				
Mailing Address 10100 Santa Monica Blvd Ste 1300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Los Angeles State CA Zip Code 90067-4114	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 261 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Patricia Rich

Mailing Address 1575 Carla Rdg

City State Zip Code  
Beverly Hills CA 90210-2501

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11994

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Andrew S Gavin

Mailing Address 1375 Goucher St

City State Zip Code  
Pacific Palisades CA 90272-2622

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11995

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Reagan W Silber

Mailing Address 200 Crescent Ct Ste 1310

City State Zip Code  
Dallas TX 75201-1580

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11996

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 262 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charlotte Hanes

Mailing Address 2770 Chatham Farm Road

City Winston Salem State NC Zip Code 27106

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11997

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephen G Charpentier

Mailing Address 2285 W Eau Gallie Blvd

City Melbourne State FL Zip Code 32935-3184

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11998

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jon Hawk

Mailing Address 232 Troon W

City Macon State GA Zip Code 31210-4949

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-11999

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 263 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Stuart Ewen

Mailing Address 277 W End Ave

City State Zip Code  
New York NY 10023-2604

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

186.10

**B.**

Full Name (Last, First, Middle Initial)  
Kenneth Hayes

Mailing Address 9821 NW Skyline Blvd

City State Zip Code  
Portland OR 97231-2636

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12001

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1850.00

**C.**

Full Name (Last, First, Middle Initial)  
Laurene Powell Jobs

Mailing Address 625 Emerson St

City State Zip Code  
Palo Alto CA 94301-1683

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12002

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4336.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 264 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Amy Harmon

Mailing Address 726 Euclid Ave

City Berkeley State CA Zip Code 94708-1334

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12003

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Barbara Timmer

Mailing Address 2629 Main St  
PMB 115

City Santa Monica State CA Zip Code 90405-4001

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12004

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Nick Del Rosso

Mailing Address 1909 Maryland Ave

City Charlotte State NC Zip Code 28209-1601

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12005

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 265 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Wayne Hogan

Mailing Address 233 E Bay St  
8th Floor

City Jacksonville State FL Zip Code 32202-3452

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12006

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Anthony Gallucci

Mailing Address 14 Wenden Ct

City Bratenahl State OH Zip Code 44108-1165

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12007

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Wade Barber, Jr

Mailing Address 803 Greenwood Rd

City Chapel Hill State NC Zip Code 27514-3909

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12008

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

2300.00

500.00

300.00

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 267 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ms Fern K Hurst

Mailing Address 1060 5th Ave

City State Zip Code  
New York NY 10128-0104

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12012

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr John P Hall

Mailing Address 252 7th Ave Apt 5Q

City State Zip Code  
New York NY 10001-7332

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12013

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gordon R Melson

Mailing Address PO Box 1204

City State Zip Code  
Seminole OK 74818-1204

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12014

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 268 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Mr John W Norman

Mailing Address 127 NW 10th St

City Oklahoma City State OK Zip Code 73103-4903

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12015

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Reggie N Whitten

Mailing Address 18701 Hunter Creek Dr

City Edmond State OK Zip Code 73003-4133

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12016

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Rachelle Whitten

Mailing Address 18701 Hunter Creek Dr

City Edmond State OK Zip Code 73003-4133

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12017

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 269 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Mr Michael Burrage Mailing Address PO Box 1727	<b>Transaction ID:</b> SB28A-12018 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8							
M	M	/	D	D	/	Y	Y	Y	Y																			
0	3		2	4		2	0	0	8																			
City State Zip Code Durant OK 74702-1727 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>4</td><td>6</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	4	6	0	0	.	0	0																				
4	6	0	0	.	0	0																						
<b>B.</b> Full Name (Last, First, Middle Initial) Sean Burrage Mailing Address 1510 NE Oakridge Dr City State Zip Code Claremore OK 74017-1463 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12019 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2</td><td>1</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2	1	0	0	.	0	0
M	M	/	D	D	/	Y	Y	Y	Y																			
0	3		2	4		2	0	0	8																			
2	1	0	0	.	0	0																						
<b>C.</b> Full Name (Last, First, Middle Initial) Carole Burrage Mailing Address 1510 NE Oakridge Dr City State Zip Code Claremore OK 74017-1463 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12020 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2</td><td>1</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2	1	0	0	.	0	0
M	M	/	D	D	/	Y	Y	Y	Y																			
0	3		2	4		2	0	0	8																			
2	1	0	0	.	0	0																						

**SUBTOTAL** of Disbursements This Page (optional) .....

**8800.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joseph S Patt

Mailing Address 585 W End Ave  
Apt 4A

City State Zip Code  
New York NY 10024-1715

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12021

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark Golovcsenko

Mailing Address 22 Peach Tree Ln

City State Zip Code  
Briarcliff Manor NY 10510-2638

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12022

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Rao

Mailing Address 2121 Jamieson Ave #2111

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12023

Date of Disbursement

/   /

Amount of Each Disbursement this Period

279.56

**SUBTOTAL** of Disbursements This Page (optional) .....

4879.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Carolyn A Taylor Mailing Address PO Box 309	<b>Transaction ID:</b> SB28A-12024 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Claremore State OK Zip Code 74018-0309 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2100.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Lillian Jayne Mailing Address 2408 Old Shawnee Rd City Muskogee State OK Zip Code 74403-1561 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12025 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>191.56</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas J Dimmock Mailing Address 8409 Bournemouth Dr City Raleigh State NC Zip Code 27615-2005 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12026 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4591.56**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John T Coley, IV

Mailing Address 117 Starwood Ln

City State Zip Code  
Holly Springs NC 27540-8345

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12027

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Timothy Dorris

Mailing Address 17432 Garrett Rd

City State Zip Code  
Johnston City IL 62951-2415

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12028

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jonathan T Dorris

Mailing Address 72 Callabell Rd

City State Zip Code  
Louisville KY 40206-2224

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12029

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 273 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David N Dorris

Mailing Address 603 N Main St

City Athens State IL Zip Code 62613-9265

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12030

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel V Dorris

Mailing Address 3600 16th St NW

City Washington State DC Zip Code 20010-1102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12031

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Amelia S Buragas

Mailing Address 5518 Dahlen Dr

City Madison State WI Zip Code 53705-1342

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12032

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Stacey Lynch Fortier</p> <p>Mailing Address 802 Towanda Ave</p> <p>City Bloomington State IL Zip Code 61701-3337</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB28A-12033</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) Thomas E Hamer</p> <p>Mailing Address 4712 Winter Dr</p> <p>City Anderson State IN Zip Code 46012-9568</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB28A-12034</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) James E Mitchell</p> <p>Mailing Address PO Box 444</p> <p>City Athens State IL Zip Code 62613-0444</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB28A-12035</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Connie Oltman

Mailing Address 309 Fairway Dr Unit

City State Zip Code  
Bloomington IL 61701-3403

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12036

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel F Roehrs

Mailing Address 1211 Shadowood Dr

City State Zip Code  
Spartanburg SC 29301-5660

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12037

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Susan Roehrs

Mailing Address 1211 Shadowood Dr

City State Zip Code  
Spartanburg SC 29301-5660

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12038

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Patricia W Wheeler

Mailing Address 10950 Arthur Auten Rd

City State Zip Code  
Huntersville NC 28078-8374

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12039

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Frank Giraud

Mailing Address 15 W 81st St Apt 13H

City State Zip Code  
New York NY 10024-6022

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12040

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Philip W Anderson

Mailing Address 10500 Shady Glade Ln

City State Zip Code  
Oklahoma City OK 73151-9492

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12041

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 277 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Peter Fulmer

Mailing Address 17205 Whimbrel Ln

City Edmond State OK Zip Code 73003-8412

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12042

Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)  
Jay M Mitchel

Mailing Address 4601 Olde Village Cir

City Edmond State OK Zip Code 73013-4768

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12043

Date of Disbursement

/   /

Amount of Each Disbursement this Period

850.00

**C.**

Full Name (Last, First, Middle Initial)  
Derrick L Morton

Mailing Address 1405 NW 147th St

City Edmond State OK Zip Code 73013-1533

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12044

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3215.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 278 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Julie Morton

Mailing Address 1405 NW 147th St

City Edmond State OK Zip Code 73013-1533

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12045

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert W Newman

Mailing Address 8116 NW 114th St

City Oklahoma City State OK Zip Code 73162-2000

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12046

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Jason E Roselius

Mailing Address 6724 NE 101st St

City Oklahoma City State OK Zip Code 73151-9154

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12047

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Lucile P Herbert	<b>Transaction ID:</b> SB28A-12048 <b>Date of Disbursement</b>																				
Mailing Address 368 Pacific St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Brooklyn State NY Zip Code 11217-2218	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) C Gareth Gaston	<b>Transaction ID:</b> SB28A-12049 <b>Date of Disbursement</b>																				
Mailing Address 117 E 10th St Apt 4	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10003-7523	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mark A Feldman	<b>Transaction ID:</b> SB28A-12050 <b>Date of Disbursement</b>																				
Mailing Address 52 Salisbury Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Newton State MA Zip Code 02458-1948	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Marvin Lundy

Mailing Address 1820 Rittenhouse Sq

City Philadelphia State PA Zip Code 19103-5832

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12051

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

George C Biddle

Mailing Address 447 E 57th St # 12FL

City New York State NY Zip Code 10022-3064

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12052

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Leigh Anne Dorris

Mailing Address 23788 E 800 North Rd

City Le Roy State IL Zip Code 61752-7556

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12053

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) John C Hueston Mailing Address 624 Poppy Ave	<b>Transaction ID:</b> SB28A-12054 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Corona del Mar CA 92625-2512 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Tracy Wheeler Hardy Mailing Address 6645 Gaywind Dr City State Zip Code Charlotte NC 28226-6902 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12055 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Howard A Wheeler, III Mailing Address 1918 Lennox Ave City State Zip Code Charlotte NC 28203-5308 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12056 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5600.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael J Buragas

Mailing Address 5518 Dahlen Dr

City Madison State WI Zip Code 53705-1342

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12057

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Dianne Newman

Mailing Address 2832 Bobwhite Trl

City Edmond State OK Zip Code 73003-2304

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12058

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Terri L Roselius

Mailing Address 6724 NE 101st St

City Oklahoma City State OK Zip Code 73151-9154

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12059

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Leslie Dougherty Biddle

Mailing Address 447 E 57th St Fl 12

City State Zip Code  
New York NY 10022-3064

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12060

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles Patrick

Mailing Address 38 Church St

City State Zip Code  
Charleston SC 29401-2742

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12061

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jody Buckley

Mailing Address Dept 78  
PO Box 10195

City State Zip Code  
Palo Alto CA 94303-0995

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12062

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John Scott Grigsby

Mailing Address 1009 Francisco St

City State Zip Code  
San Francisco CA 94109-1126

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12063

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Gerhard Oertel

Mailing Address 330 Kensington Dr

City State Zip Code  
Madison WI 53704-5941

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12065

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeannette Sink

Mailing Address 146 N Plaza Ct

City State Zip Code  
Mt Pleasant SC 29464-6301

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12066

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
George Sink

Mailing Address 146 N Plaza Ct

City State Zip Code  
Mt Pleasant SC 29464-6301

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12067

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Debbie Hill

Mailing Address 176 W King St

City State Zip Code  
Hillsborough NC 27278-2544

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12068

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Katarina Mesarovich

Mailing Address 110 Riverside Drive, apt 16A

City State Zip Code  
New York NY 10024

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12069

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert Duby

Mailing Address PO Box 7017

City State Zip Code  
Nashua NH 03060-7017

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12070

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1450.00

**B.**

Full Name (Last, First, Middle Initial)  
Neil Thomas Proto

Mailing Address 2733 Ordway St NW Apt 6

City State Zip Code  
Washington DC 20008-5056

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12071

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephan Blandin

Mailing Address 319 N Washington Ave

City State Zip Code  
Park Ridge IL 60068-3543

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12072

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Matthew Pearson

Mailing Address 110 Ranger Dr

City Boerne State TX Zip Code 78006-8916

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12073

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph T Edwards

Mailing Address 3204 Rolston Road

City Greenville State NC Zip Code 27858

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12074

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Gunn

Mailing Address 112 Chimney Hill Road

City Columbia State SC Zip Code 29209

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12075

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 288 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ronald Weindruch

Mailing Address 3020 Azalea Court

City Longwood State FL Zip Code 32779

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12076

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Alexander Klein, III

Mailing Address 440 Louisiana St  
Ste 2000

City Houston State TX Zip Code 77002-1639

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12077

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gerald Acker

Mailing Address 8621 Hendrie Blvd

City Huntington Woods State MI Zip Code 48070-1619

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12078

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 289 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Barry J Goodman	<b>Transaction ID:</b> SB28A-12079 <b>Date of Disbursement</b>																				
Mailing Address 28854 Herndonwood Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Farmington Hills State MI Zip Code 48334-5237	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Lanny S Vines	<b>Transaction ID:</b> SB28A-12080 <b>Date of Disbursement</b>																				
Mailing Address 2142 Highland Ave S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Birmingham State AL Zip Code 35205-4002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ron Bell	<b>Transaction ID:</b> SB28A-12081 <b>Date of Disbursement</b>																				
Mailing Address 10 Quarry Lake Ct NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Atlanta State GA Zip Code 30342-1965	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3550.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 290 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James R. Potter

Mailing Address 1636 W Laurel St

City Springfield State IL Zip Code 62704-3321

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12082

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Crymes G. Pittman

Mailing Address 410 S President St

City Jackson State MS Zip Code 39201-5007

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12083

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Phyllis Stevens

Mailing Address 4601 Pleasant St Apt 353

City West Des Moines State IA Zip Code 50266-5483

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12084

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1487.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6087.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 291 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lawrie Nickerson

Mailing Address PO Box 205

City Grafton State NY Zip Code 12082-0205

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12085

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)  
Pamela Barton

Mailing Address 53 Humbert St

City Princeton State NJ Zip Code 08542-3312

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12086

Date of Disbursement

/   /

Amount of Each Disbursement this Period

208.00

**C.**

Full Name (Last, First, Middle Initial)  
Douglas Mathews

Mailing Address 5533 Elizabeth Loop SE

City Auburn State WA Zip Code 98092-3856

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12087

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

318.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 292 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Amy R Sabrin	<b>Transaction ID:</b> SB28A-12088 <b>Date of Disbursement</b>																				
Mailing Address 5414 Galena PI NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Washington State DC Zip Code 20016-2534	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Bettina Lawton	<b>Transaction ID:</b> SB28A-12089 <b>Date of Disbursement</b>																				
Mailing Address 2303 Riviera Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Vienna State VA Zip Code 22181-3116	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mr John C. Land, III	<b>Transaction ID:</b> SB28A-12090 <b>Date of Disbursement</b>																				
Mailing Address PO Box 138	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Manning State SC Zip Code 29102-0138	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 293 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
O. Fayrell Furr, Jr.

Mailing Address 3740 Indigo Run

City State Zip Code  
Conway SC 29526-7822

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12091

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Marshall Goldberg

Mailing Address 6340 W 5th St

City State Zip Code  
Los Angeles CA 90048-4718

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12092

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Gandolfo V Diblasi

Mailing Address 125 Broad St

City State Zip Code  
New York NY 10004-2400

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12094

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 294 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Betty Ann Rosenthal

Mailing Address 6617 Lakewood Blvd

City  
Dallas

State  
TX

Zip Code  
75214-3748

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12095

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Jeremy Bates

Mailing Address 21 West St Apt 21J

City  
New York

State  
NY

Zip Code  
10006-2931

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12096

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Mayhew

Mailing Address PO Box 63

City  
Romney

State  
WV

Zip Code  
26757-0063

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12097

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 295 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

C B Squire

Mailing Address 85 Maney Branch Rd

City Weaverville State NC Zip Code 28787-9751

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12098

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Sherri Ontjes

Mailing Address 105 Fidelity St Apt B40

City Carrboro State NC Zip Code 27510-2081

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12099

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Alex H MacDonald

Mailing Address 24 Coolidge Hill Rd

City Cambridge State MA Zip Code 02138-5527

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12100

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 296 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
George Welde

Mailing Address 850 Park Ave

City State Zip Code  
New York NY 10021-1845

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12101

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert J Katz

Mailing Address 180 E 79th St

City State Zip Code  
New York NY 10021-0437

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12102

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert D Lemon

Mailing Address 2705 NW 59th St

City State Zip Code  
Oklahoma City OK 73112-7025

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12103

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jane L Katz

Mailing Address 180 E 79th St

City State Zip Code  
New York NY 10021-0437

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12104

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
John L Harlan

Mailing Address 2815 E 88th St

City State Zip Code  
Tulsa OK 74137-2536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12105

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Shirley D Harlan

Mailing Address 2815 E 88th St

City State Zip Code  
Tulsa OK 74137-2536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12106

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 298 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Sarah B O'hagan

Mailing Address 1165 5th Ave

City State Zip Code  
New York NY 10029-6931

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12107

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Susan Cartsonis

Mailing Address 432 Hillside Ln

City State Zip Code  
Santa Monica CA 90402-1112

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12108

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

C.

Full Name (Last, First, Middle Initial)  
Philip H Selway

Mailing Address 3980 Farmouth Dr

City State Zip Code  
Los Angeles CA 90027-1313

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12109

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3075.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 299 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Glenn R Beustring

Mailing Address 2624 E 21st St Ste 1

City State Zip Code  
Tulsa OK 74114-1718

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12110

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Sturm

Mailing Address 4549 Harris Trl NW

City State Zip Code  
Atlanta GA 30327-3823

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12111

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Linda Lamar Billups

Mailing Address 9608 Evelyn Pl

City State Zip Code  
River Ridge LA 70123-2019

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12112

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 300 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Alice Neuhauser Mailing Address 1466 11th St	<b>Transaction ID:</b> SB28A-12113 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Manhattan Beach CA 90266-6108 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph Gray Mailing Address 2060 Webster St City State Zip Code Palo Alto CA 94301-4049 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12114 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Patricia Graham Mailing Address 1016 W Diversey Pkwy City State Zip Code Chicago IL 60614-1317 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12115 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1470.40</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

4020.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Elisabeth Harding

Mailing Address 39 Homesdale Rd

City State Zip Code  
Bronxville NY 10708-4911

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12116

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David B Bell

Mailing Address 619 Greene St

City State Zip Code  
Augusta GA 30901-1427

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12117

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)  
Veronica Roth

Mailing Address 3728 Princess Ln

City State Zip Code  
Dallas TX 75229-5230

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12118

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 302 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Christopher C Pak

Mailing Address 3250 Wilshire Blvd Fl 400

City Los Angeles State CA Zip Code 90010-1437

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12119

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Sarah Thaler

Mailing Address 5 Leonard Rd

City Bronxville State NY Zip Code 10708-1606

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12120

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Henry G Miller

Mailing Address 29 Birch Brook Rd

City Bronxville State NY Zip Code 10708-2021

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12121

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 303 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Alexander D Forger	<b>Transaction ID:</b> SB28A-12122 <b>Date of Disbursement</b>																				
Mailing Address 20 Sutton Pl S Apt 15C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10022-4165	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Barbara S Tomber	<b>Transaction ID:</b> SB28A-12123 <b>Date of Disbursement</b>																				
Mailing Address 50 Harbor Oak Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Tiburon State CA Zip Code 94920-1836	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey O Bramlett	<b>Transaction ID:</b> SB28A-12124 <b>Date of Disbursement</b>																				
Mailing Address 3099 E Pine Valley Rd NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Atlanta State GA Zip Code 30305-1926	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 304 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael Miller

Mailing Address 140 W 58th St

City State Zip Code  
New York NY 10019-2140

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12125

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Rachel L Mellon

Mailing Address 8554 Oak Spring Rd

City State Zip Code  
Upperville VA 20184-1813

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12126

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael H Kerr

Mailing Address 76 Wood Ln

City State Zip Code  
Woodmere NY 11598-2233

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12127

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 305 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Ruth Weissberg	<b>Transaction ID:</b> SB28A-12128 <b>Date of Disbursement</b>																				
Mailing Address 2 Lexington Ave Apt 505	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10010-5405	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Richard C Strauss	<b>Transaction ID:</b> SB28A-12129 <b>Date of Disbursement</b>																				
Mailing Address 8401 N Central Expy Ste 350	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Dallas State TX Zip Code 75225-4404	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) G Anthony Bertig	<b>Transaction ID:</b> SB28A-12130 <b>Date of Disbursement</b>																				
Mailing Address 121 Lincolnway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Valparaiso State IN Zip Code 46383-5637	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Linda Huey

Mailing Address 733 N 7th St

City Lompoc State CA Zip Code 93436-4836

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12131

Date of Disbursement

/   /

Amount of Each Disbursement this Period

564.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda Elliott

Mailing Address 2433 E Whitton Ave

City Phoenix State AZ Zip Code 85016-7419

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12132

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
Sander Esserman

Mailing Address 3310 Saint Johns Dr

City Dallas State TX Zip Code 75205-2921

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12133

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2614.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Jeannie McGuire

Mailing Address 400 E 71st St Apt 16D

City State Zip Code  
New York NY 10021-4816

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12134

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Wylie A Aitken

Mailing Address 3 Imperial Promenade Ste 800

City State Zip Code  
Santa Ana CA 92707-5919

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12135

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Nancy Blachman

Mailing Address 1538 Burlingame Ave

City State Zip Code  
Burlingame CA 94010-5102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12136

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 308 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

David Desjardins

Mailing Address 1538 Burlingame Ave

City State Zip Code  
Burlingame CA 94010-5102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12137

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Ashleigh Aitken

Mailing Address 5141 E Greensboro Ln

City State Zip Code  
Anaheim CA 92807-4611

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12138

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Sarah Barton

Mailing Address 1020 37th Ave E

City State Zip Code  
Seattle WA 98112-4330

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12139

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

5600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 309 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mary A Parker

Mailing Address 1230 2nd Ave S

City Nashville State TN Zip Code 37210-4110

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12140

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Michael Maher

Mailing Address PO Box 2146

City Winter Park State FL Zip Code 32790-2146

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12141

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

David Zapolsky

Mailing Address 3008 39th Ave W

City Seattle State WA Zip Code 98199-2519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12142

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 310 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Felicia Woytak

Mailing Address 18 Oakvale Ave

City Berkeley State CA Zip Code 94705-2404

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12143

Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

**B.**

Full Name (Last, First, Middle Initial)  
Andre Shashaty

Mailing Address 20 Inverness Dr

City San Rafael State CA Zip Code 94901-2418

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12144

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Lesley Shashaty

Mailing Address 20 Inverness Dr

City San Rafael State CA Zip Code 94901-2418

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12145

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 311 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
James Chumbley

Mailing Address 11804 Marine View Dr

City Edmonds State WA Zip Code 98026-3126

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12146

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
Michael T Runyan

Mailing Address 230 Beavers Bnd

City Marshall State TX Zip Code 75672-6555

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12147

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Kimberly Runyan

Mailing Address 230 Beavers Bnd

City Marshall State TX Zip Code 75672-6555

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12148

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

5100.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 312 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jonathan Bridge

Mailing Address 2833 Magnolia Blvd W

City State Zip Code  
Seattle WA 98199-2410

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12149

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael L Armitage

Mailing Address 598 27th St

City State Zip Code  
Manhattan Beach CA 90266-2210

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12150

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Hal K Gillespie

Mailing Address 3402 Oak Grove Ave Ste 200

City State Zip Code  
Dallas TX 75204-2391

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12151

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4100.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 313 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David Hardt

Mailing Address 5803 Vickery Blvd

City Dallas State TX Zip Code 75206-6335

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12152

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lisa Nathanson Busch

Mailing Address 28 Woodland Rd

City Roslyn State NY Zip Code 11576-1434

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12153

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Matthew Thiel

Mailing Address 432 E Pine St

City Missoula State MT Zip Code 59802-4632

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12154

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joe Mcvay, Jr

Mailing Address 210 79th Ave N

City State Zip Code  
Myrtle Beach SC 29572-4302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12155

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
Nina Dillon

Mailing Address 707 E Harrison St

City State Zip Code  
Seattle WA 98105-410

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12156

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)  
Laura Wertheimer

Mailing Address 3149 Newark St NW

City State Zip Code  
Washington DC 20008-3344

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12157

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Andrew Leming

Mailing Address W194S6937 Hillendale Dr

City State Zip Code  
Muskego WI 53150-9094

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12158

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1450.00

**B.**

Full Name (Last, First, Middle Initial)  
Jennifer Berlekamp

Mailing Address 120 Hazel Ln

City State Zip Code  
Piedmont CA 94611-4033

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12159

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Winston Deblanc

Mailing Address 10615 Shadow Wood Dr  
Ste 250

City State Zip Code  
Houston TX 77043-2845

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12160

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Patrick Oglesby

Mailing Address 1830 N Lakeshore Dr

City State Zip Code  
Chapel Hill NC 27514-6733

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12161

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Lynne Hodges

Mailing Address 14002 Rancho Vista Bnd

City State Zip Code  
San Diego CA 92130-5248

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12162

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Donovan R Flora

Mailing Address 501 Crockett St

City State Zip Code  
Seattle WA 98109-2136

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12163

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Luther S Pate, IV

Mailing Address PO Box 468

City Northport State AL Zip Code 35476-0468

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12164

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Elyse Barroway

Mailing Address 636 Creighton Rd

City Villanova State PA Zip Code 19085-2034

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12165

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Andrew L Barroway

Mailing Address 636 Creighton Rd

City Villanova State PA Zip Code 19085-2034

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12166

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

J C Spink

Mailing Address 9100 Wilshire Blvd Ste 1000W

City State Zip Code  
Beverly Hills CA 90212-3463

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12167

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**B.**

Full Name (Last, First, Middle Initial)

Edward F Petrosky

Mailing Address 8 Kensington Ct

City State Zip Code  
Warren NJ 07059-5057

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12168

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Neil Haugerud

Mailing Address 25887 County 12

City State Zip Code  
Preston MN 55965-1520

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12169

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John McDougall

Mailing Address 6107 Marthas Glen Rd

City Columbia State SC Zip Code 29209-1312

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12170

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Seth Green

Mailing Address 9100 Wilshire Blvd Ste 1000W

City Beverly Hills State CA Zip Code 90212-3413

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12171

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Frank D Pond

Mailing Address 2433 San Marco Dr

City Los Angeles State CA Zip Code 90068-2736

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12172

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Terry E Richardson, Jr

Mailing Address PO Box 1368

City State Zip Code  
Barnwell SC 29812-1368

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12173

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

B.

Full Name (Last, First, Middle Initial)  
Laurie Patterson

Mailing Address 2609 Fillmore St

City State Zip Code  
San Francisco CA 94115-1235

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12174

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)  
Michael L Mannion

Mailing Address 3 Hill Dr

City State Zip Code  
Petaluma CA 94952-1759

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12175

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Hake

Mailing Address 6730 Enterprise Rd

City State Zip Code  
Glen Ellen CA 95442-9503

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12176

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffery J Fadeff

Mailing Address 351 California St Apt 200

City State Zip Code  
San Francisco CA 94104-2412

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12177

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Renee Bush

Mailing Address 3277 Keith Ave

City State Zip Code  
Castro Valley CA 94546-2925

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12178

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1275.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5875.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John C Mullen

Mailing Address 70 W Madison St

City Chicago State IL Zip Code 60602-4252

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12179

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Scott Gregson

Mailing Address 120 W Hopkins St Ste 200

City San Marcos State TX Zip Code 78666-5637

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12180

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)  
Linden Rhoads Amadon

Mailing Address 4215 E Blaine St

City Seattle State WA Zip Code 98112-3229

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12181

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4660.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ms Cheryl Radtke

Mailing Address 6345 Hawfield Dr

City  
Fayetteville

State  
NC

Zip Code  
28303-2022

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12182

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**B.**

Full Name (Last, First, Middle Initial)

Frank Sommerfield

Mailing Address 156 5th Ave Ste 1219

City  
New York

State  
NY

Zip Code  
10010-7736

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12183

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Marte J Bassi

Mailing Address 60 Crestlake Dr

City  
San Francisco

State  
CA

Zip Code  
94132-1333

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12184

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Paul Anton Zevnik

Mailing Address 2930 44th St NW

City Washington State DC Zip Code 20016-3549

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12185

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jefrey Pollock

Mailing Address 825 W End Ave Apt 7E

City New York State NY Zip Code 10025-5349

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12186

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1150.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary M Paul

Mailing Address 4227 Murietta Ave

City Sherman Oaks State CA Zip Code 91423-4224

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12187

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Leslie Maclean

Mailing Address 5301 W Mockingbird Ln

City State Zip Code  
Dallas TX 75209-5605

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12188

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

W Gordon Ball

Mailing Address 550 W Main St Ste 750

City State Zip Code  
Knoxville TN 37902-2531

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12189

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas E Black, Jr

Mailing Address 582 Wolf Run Rd

City State Zip Code  
Bartonville TX 76226-8426

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12190

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert B Roden

Mailing Address 1759 Vestwood Hills Dr

City Birmingham State AL Zip Code 35216-1368

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12191

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
Zoe A Buzbee

Mailing Address 405 W Spreading Oaks Ave

City Friendswood State TX Zip Code 77546-4446

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12192

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Anthony G Buzbee

Mailing Address 405 W Spreading Oaks Ave

City Friendswood State TX Zip Code 77546-4446

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12193

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas H Lee

Mailing Address 2532 Blair Blvd

City Nashville State TN Zip Code 37212-4808

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12194

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ted D Meyer

Mailing Address 7206 Avenue B

City Bellaire State TX Zip Code 77401-5125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12195

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Sharon Malcolmson

Mailing Address 7100 W El Camino del Cerro

City Tucson State AZ Zip Code 85745-9339

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12196

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
F Scott Baldwin, Jr

Mailing Address 2301 Lower Port Caddo Rd

City Marshall State TX Zip Code 75672-2231

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12197

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Holly Baldwin

Mailing Address 2301 Lower Port Caddo Rd

City Marshall State TX Zip Code 75672-2231

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12198

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Judith Avery

Mailing Address 2222 Hyde St Apt 7

City San Francisco State CA Zip Code 94109-1589

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12199

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6800.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Stewart L Cohen

Mailing Address 610 Montgomery School Ln

City Wynnewood State PA Zip Code 19096-1014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12200

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Christopher M Placitella

Mailing Address 2 Penn Center Plaza, Ste 1705

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12202

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Kim R Baker

Mailing Address PO Box 1660

City Alexander City State AL Zip Code 35011-1660

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12203

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John Bair

Mailing Address 737 Main St

City Buffalo State NY Zip Code 14203-1335

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12204

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1800.00

**B.**

Full Name (Last, First, Middle Initial)  
Christine M North

Mailing Address 29 Old Landing Rd

City Pembroke State MA Zip Code 02359-1948

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12205

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Kristine T Gaier

Mailing Address 8 E Lake Dr

City Katonah State NY Zip Code 10536-3501

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12206

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Donald R Strickland

Mailing Address 417 Brighton Rd

City Durham State NC Zip Code 27707-4651

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12207

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David L Perry

Mailing Address 4751 Ocean Dr

City Corpus Christi State TX Zip Code 78412-2675

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12208

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph A Uremovic

Mailing Address PO Box 5654

City Fresno State CA Zip Code 93755-5654

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12209

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 332 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Zachary Kerr

Mailing Address 220 E 63rd St

City State Zip Code  
New York NY 10021-7660

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12210

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jerry Neil Paul

Mailing Address 1063 Vista Ridge Ln

City State Zip Code  
Westlake Village CA 91362-5615

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12211

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary V Judd

Mailing Address 830 5th St

City State Zip Code  
Petaluma CA 94952-5141

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12212

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James E Morton

Mailing Address 1786 Millbrook Rd

City State Zip Code  
Salt Lake City UT 84106-3227

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12213

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael A Karsch

Mailing Address 146 Central Park W Apt 9E

City State Zip Code  
New York NY 10023-2005

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12214

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Allen F London

Mailing Address 420 E 80th St

City State Zip Code  
New York NY 10075-1052

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12215

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 334 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Nariman S Teymourian

Mailing Address 247 Atherton Ave

City Atherton State CA Zip Code 94027-5436

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12216

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Sandra C Ferrando

Mailing Address 305 Selby Ln

City Atherton State CA Zip Code 94027-3932

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12217

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mehrangiz Teymourian

Mailing Address 1271 Granville Ave Apt 205

City Los Angeles State CA Zip Code 90025-1664

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12218

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 335 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Iraj Teymourian	<b>Transaction ID:</b> SB28A-12219 <b>Date of Disbursement</b>																				
Mailing Address 1271 Granville Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Los Angeles State CA Zip Code 90025-1662	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) R David Spreng	<b>Transaction ID:</b> SB28A-12220 <b>Date of Disbursement</b>																				
Mailing Address 2335 Oakdale Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Hillsborough State CA Zip Code 94010-6140	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Alan C Mendelson	<b>Transaction ID:</b> SB28A-12221 <b>Date of Disbursement</b>																				
Mailing Address 76 de Bell Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Atherton State CA Zip Code 94027-2253	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 336 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Diane W Savage

Mailing Address 1165 San Mateo Dr

City State Zip Code  
Menlo Park CA 94025-5522

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12222

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
William G Ross, Jr

Mailing Address 377 Tenney Cir

City State Zip Code  
Chapel Hill NC 27514-7806

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12223

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Martin J Durkan, Jr

Mailing Address 22401 Sweeney Rd SE

City State Zip Code  
Maple Valley WA 98038-6440

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12224

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3800.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 337 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Lita Luvera

Mailing Address 1007 Sea Cliff Dr NW

City State Zip Code  
Gig Harbor WA 98332-9518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12225

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Paul Luvera

Mailing Address 1007 Sea Cliff Dr NW

City State Zip Code  
Gig Harbor WA 98332-9518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12226

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Joel Cunningham

Mailing Address 701 35th Ave

City State Zip Code  
Seattle WA 98122-5203

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12227

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Leslie E Giblett

Mailing Address 2518 3rd Ave W

City State Zip Code  
Seattle WA 98119-2306

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12228

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James D Sinegal

Mailing Address PO Box 201

City State Zip Code  
Medina WA 98039-0201

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12229

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms Bertha M Holt

Mailing Address 509 Country Club Dr

City State Zip Code  
Burlington NC 27215-4927

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12230

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 339 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Betty P Kenan

Mailing Address PO Box 4150

City State Zip Code  
Chapel Hill NC 27515-4150

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12231

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
R Timothy Morrison

Mailing Address 7 Brookhaven Dr NE

City State Zip Code  
Atlanta GA 30319-3003

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12232

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Antonia K Morrison

Mailing Address 7 Brookhaven Dr NE

City State Zip Code  
Atlanta GA 30319-3003

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12233

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

6900.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 340 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Ikard

Mailing Address 515 Congress Ave Ste 1320

City Austin State TX Zip Code 78701-3507

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12234

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
Bridget Black

Mailing Address 582 Wolf Run Rd

City Bartonville State TX Zip Code 76226-8426

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12235

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
Darla Lexington

Mailing Address 6 Shadder Way

City Houston State TX Zip Code 77019-1416

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12236

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**4665.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

PAGE 341 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Toby E Toudouze	<b>Transaction ID:</b> SB28A-12237 <b>Date of Disbursement</b>																				
Mailing Address 5419 McCommas Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Dallas State TX Zip Code 75206-5625	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Luck Davidson	<b>Transaction ID:</b> SB28A-12238 <b>Date of Disbursement</b>																				
Mailing Address 310 Wentworth Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Greensboro State NC Zip Code 27408-6522	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kim E Ferrarie	<b>Transaction ID:</b> SB28A-12239 <b>Date of Disbursement</b>																				
Mailing Address 1923 Park St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Houston State TX Zip Code 77019-6116	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">1265.00</td> </tr> </table>	1265.00																			
1265.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4065.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 342 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John M O'Quinn

Mailing Address 6 Shadder Way

City Houston State TX Zip Code 77019-1416

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12240

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Philipp L Rimmler

Mailing Address 44 Middlesex Rd

City Buffalo State NY Zip Code 14216-3616

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12241

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms Anne Rimler

Mailing Address 44 Middlesex Rd

City Buffalo State NY Zip Code 14216-3616

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12242

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 343 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charles E Soechting

Mailing Address 107 Oak Shadow

City State Zip Code  
San Marcos TX 78666-2455

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12243

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Tom Pirtle

Mailing Address 27 E Rivercrest Dr

City State Zip Code  
Houston TX 77042-2513

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12244

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Ryland Pirtle

Mailing Address 27 E Rivercrest Dr

City State Zip Code  
Houston TX 77042-2513

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12245

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 344 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kenneth J Wilson

Mailing Address 324 Magnolia Lake Ct

City Aiken State SC Zip Code 29803-2653

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12247

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

850.00

**B.**

Full Name (Last, First, Middle Initial)  
Edward F Chacker

Mailing Address 1731 Spring Garden St

City Philadelphia State PA Zip Code 19130-3915

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12248

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas C Hutton

Mailing Address 39 Homesdale Rd

City Bronxville State NY Zip Code 10708-4911

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12249

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

R Henry Richards

Mailing Address 118 Alpine Ave

City  
Los Gatos

State  
CA

Zip Code  
95030-7100

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12250

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Caroline Buerkle

Mailing Address 4405 Willow View Lane, NW

City  
Albuquerque

State  
NM

Zip Code  
87120

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12251

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Share

Mailing Address 1210 Lindenwood Dr.

City  
Winnetka

State  
IL

Zip Code  
60093

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12253

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2950.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 346 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Valerie Robbins

Mailing Address 1511 N Amanda Cir NE

City Atlanta State GA Zip Code 30329-3319

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12254

Date of Disbursement

/   /

Amount of Each Disbursement this Period

825.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Pferd

Mailing Address 1106 Tabor St

City Houston State TX Zip Code 77009-3028

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12255

Date of Disbursement

/   /

Amount of Each Disbursement this Period

302.00

**C.**

Full Name (Last, First, Middle Initial)  
Brendon J Briggs

Mailing Address 3295 Sable Ridge Dr

City Buford State GA Zip Code 30519-7684

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12256

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2627.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 347 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charles Doughdrill

Mailing Address PO Box 1240

City Fraser State CO Zip Code 80442-1240

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12257

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Barnett

Mailing Address 4511 Arcady Ave

City Dallas State TX Zip Code 75205-3606

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12258

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Janet Levy Pauli

Mailing Address 4258 Point White Dr NE

City Bainbridge Island State WA Zip Code 98110-2050

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12259

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 348 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mark Davis

Mailing Address 3502 Woodlawn Dr

City Honolulu State HI Zip Code 96822-1450

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12260

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Peter J Bragdon

Mailing Address 7921 SE 31st Ave

City Portland State OR Zip Code 97202-8540

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12262

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Rudell

Mailing Address 146 Wilder Ave

City Los Gatos State CA Zip Code 95030-5924

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12263

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 349 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
J Michael Gaither

Mailing Address 1158 S Kings Dr

City Charlotte State NC Zip Code 28207-1806

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12264

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Winifred Dooley

Mailing Address 4420 N Clybourn Ave

City Burbank State CA Zip Code 91505-4005

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12265

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Alan M Snitow

Mailing Address 1713 Madera St

City Berkeley State CA Zip Code 94707-2513

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12266

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 350 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Arthur Weiss Mailing Address 2660 Peachtree Rd NW Apt 37B	<b>Transaction ID:</b> SB28A-12267 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30305-3682 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Peter D Ressler Mailing Address PO Box 375 City Oldwick State NJ Zip Code 08858-0375 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12268 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Cynthia H Blizzard Mailing Address 9025 Sandringham Dr City Houston State TX Zip Code 77024-5822 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12269 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4300.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) David G Matthiesen	<b>Transaction ID:</b> SB28A-12270 <b>Date of Disbursement</b>																				
Mailing Address 511 Lovett Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Houston State TX Zip Code 77006-4020	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Durkan	<b>Transaction ID:</b> SB28A-12271 <b>Date of Disbursement</b>																				
Mailing Address 3757 S Ridgeway Pl	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Seattle State WA Zip Code 98144-6211	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ruth E Bernstein	<b>Transaction ID:</b> SB28A-12272 <b>Date of Disbursement</b>																				
Mailing Address 488 Madison Ave Ste 1100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10022-5720	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

4850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Allene D Evans

Mailing Address 1106 Yaupon Valley Rd

City State Zip Code  
West Lake Hills TX 78746-4329

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12273

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Martin D Chitwood

Mailing Address 1230 Peachtree St

City State Zip Code  
Atlanta GA 30309-3574

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12274

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr Craig G Harley

Mailing Address 1230 Peachtree  
300 PROMENADE II

City State Zip Code  
Atlanta GA 30309-3574

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12275

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Alan Mathison

Mailing Address 22733 County 14

City State Zip Code  
Preston MN 55965-1535

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12276

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Linda Mathison

Mailing Address 22733 County 14

City State Zip Code  
Preston MN 55965-1535

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12277

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Dean A Hanley

Mailing Address 1442 Grand View Dr

City State Zip Code  
Berkeley CA 94705-1634

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12278

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 354 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William A Gaylord

Mailing Address 3630 NE Merges Dr

City Portland State OR Zip Code 97212-2767

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12279

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark R Bocci

Mailing Address 385 1st St  
Ste 215

City Lake Oswego State OR Zip Code 97034-3266

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12280

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Monzer Hourani

Mailing Address 7670 Woodway Dr Ste 160

City Houston State TX Zip Code 77063-1593

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12281

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Carolyn J Duffy

Mailing Address 1442 92nd Ave NE

City State Zip Code  
Clyde Hill WA 98004-3405

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12282

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Adam J Levinson

Mailing Address 15 Mercer St Apt 2

City State Zip Code  
New York NY 10013-2542

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12283

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Jill Gustafson

Mailing Address 20840 Engen Blvd NW

City State Zip Code  
Elk River MN 55330-8017

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12284

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kathleen F Peterson

Mailing Address 6513 Stauder Cir

City Edina State MN Zip Code 55436-1046

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12285

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Christopher E Andreas

Mailing Address 2816 Clay St Apt 1

City San Francisco State CA Zip Code 94115-1737

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12286

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jerry M Lehocky

Mailing Address 1818 Market St  
35TH FLOOR

City Philadelphia State PA Zip Code 19103-3638

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12287

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 357 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Harry Brittenham

Mailing Address 1433 San Vicente Blvd

City State Zip Code  
Santa Monica CA 90402-2203

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12288

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Andrew Rappaport

Mailing Address 16379 Skyline Blvd

City State Zip Code  
Woodside CA 94062-4438

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12289

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Deborah Rappaport

Mailing Address 16379 Skyline Blvd

City State Zip Code  
Woodside CA 94062-4438

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12290

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 358 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Stewart J Eisenberg

Mailing Address 2416 Naudain St

City Philadelphia State PA Zip Code 19146-1030

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12291

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy J Winkler

Mailing Address 16 Dressage Ct

City Cherry Hill State NJ Zip Code 08003-5121

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12292

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Fredric S Eisenberg

Mailing Address 223 Avon Rd

City Narberth State PA Zip Code 19072-2307

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12293

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 359 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Mark B Cohen

Mailing Address 907 5th Ave

City State Zip Code  
New York NY 10021-4156

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12294

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)  
Veronica Simpson

Mailing Address 1161 Cherryville Rd

City State Zip Code  
Shelby NC 28150-3664

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12295

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas D Pollan

Mailing Address 751 Edgehill Rd S

City State Zip Code  
Charlotte NC 28207-1879

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12296

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 360 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Kenneth M Rothweiler

Mailing Address 30 Northwoods Rd

City Radnor State PA Zip Code 19087-3758

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12297

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Linda A Rothweiler

Mailing Address 30 Northwoods Rd

City Radnor State PA Zip Code 19087-3758

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12298

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Timothy Nett

Mailing Address 2000 Coldwater Canyon Dr

City Beverly Hills State CA Zip Code 90210-1733

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12299

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

6900.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Bloch

Mailing Address 15138 Encanto Dr

City Sherman Oaks State CA Zip Code 91403-4410

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12300

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Devon Briger

Mailing Address 101 Central Park West Apt 14F

City New York State NY Zip Code 10023

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12301

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Marc Furstein

Mailing Address 1930 Broadway - Apt. 28G

City New York State NY Zip Code 10023

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12302

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jennifer Kinder

Mailing Address 4800 W Lovers Ln Apt 520

City Dallas State TX Zip Code 75209-3188

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12304

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Carol Berg

Mailing Address 145 Steeplechase Ave

City Mooresville State NC Zip Code 28117-9179

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12305

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Hugh Totten

Mailing Address 312 N Euclid Ave

City Oak Park State IL Zip Code 60302-2110

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12306

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Erich L Spangenberg

Mailing Address 73595 El Paseo

City State Zip Code  
Palm Desert CA 92260-4350

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12307

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Helene Cahen

Mailing Address 1442 Grand View Dr

City State Zip Code  
Berkeley CA 94705-1634

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12308

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Carol Mendelsohn

Mailing Address 15260 Ventura Blvd  
Ste 1040

City State Zip Code  
Sherman Oaks CA 91403-5345

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12309

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 364 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Judith Livingston Moore

Mailing Address 217 Broadway

City State Zip Code  
New York NY 10007-2909

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12312

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas Wilham Malone

Mailing Address 2 Ravinia Dr  
Ste 300

City State Zip Code  
Atlanta GA 30346-2104

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12313

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Tom Whatley

Mailing Address PO Box 841

City State Zip Code  
Auburn AL 36831-0841

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12314

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Christos N Gage

Mailing Address 610 N Orlando Ave  
Apt 305

City State Zip Code  
West Hollywood CA 90048-2157

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12315

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

B.

Full Name (Last, First, Middle Initial)  
Philip P Keenl

Mailing Address 2420 Chislehurst Dr

City State Zip Code  
Los Angeles CA 90027-1058

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12316

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
David Parker

Mailing Address PO Box 112

City State Zip Code  
Statesville NC 28687-0112

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12317

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Nomaan K Husain

Mailing Address 3746 Durness Way

City Houston State TX Zip Code 77025-2402

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12318

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lutfie Hassan

Mailing Address 9100 Southwest Fwy  
Ste 201

City Houston State TX Zip Code 77074-1513

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12319

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Suzanne G Millholland

Mailing Address PO Box 9127

City Hickory State NC Zip Code 28603-9127

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12320

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Joel Gregg

Mailing Address 577 Heritage Ct

City Auburn State AL Zip Code 36830-3871

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12321

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

525.00

B.

Full Name (Last, First, Middle Initial)

Steve Valentine

Mailing Address 2526 Lennoxville Rd

City Beaufort State NC Zip Code 28516-7801

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12322

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2100.00

C.

Full Name (Last, First, Middle Initial)

Joan Stuart Livingston

Mailing Address 94 Saint Botolph Street, #1

City Boston State MA Zip Code 02116-6474

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12323

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

4925.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 368 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Barney M Karpfinger

Mailing Address 357 W 20th St

City State Zip Code  
New York NY 10011-3379

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12325

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
John Cawley

Mailing Address 975 Grove St

City State Zip Code  
San Francisco CA 94117-1713

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12326

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Kathleen Glancy

Mailing Address 114 S Front St

City State Zip Code  
Wilmington NC 28401-4413

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12327

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

Full Name (Last, First, Middle Initial)  
Madeleine Stowe

Mailing Address	1990 S Bundy Dr Ste 200
-----------------	----------------------------

City	State	Zip Code
Los Angeles	CA	90025-5240

Purpose of Disbursement	Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
Gemma Daggatt

Mailing Address	933 N Northlake Way Slip 13
-----------------	-----------------------------

City	State	Zip Code
Seattle	WA	98103-8874

Purpose of Disbursement	Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

State: District:

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)  
Nora Gregor

Mailing Address 619 Mariposa Ave

City	State	Zip Code
Oakland	CA	94610-1312

Purpose of Disbursement	Contribution Refund

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

**3500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 370 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ms Bobette Gorden

Mailing Address 2248 S Forest Ave

City State Zip Code  
Tempe AZ 85282-2145

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12331

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1850.00

**B.**

Full Name (Last, First, Middle Initial)

Alan Ramo

Mailing Address 2811 Woolsey St

City State Zip Code  
Berkeley CA 94705-2608

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12332

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Laura R Belin

Mailing Address 1705 Plaza Cir

City State Zip Code  
Windsor Heights IA 50322-5760

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12333

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 371 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kristin Dudacek

Mailing Address 1401 Eleanor Ave

City State Zip Code  
Saint Paul MN 55116-2232

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12334

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
Deborah Mccutcheon

Mailing Address 405 Walden St

City State Zip Code  
Cambridge MA 02138-1349

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12335

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
Bruno Quinson

Mailing Address 1115 5th Ave

City State Zip Code  
New York NY 10128-0100

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12336

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 372 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Jay Sachs

Mailing Address 56 Hawthorne Rd

City Williamstown State MA Zip Code 01267-2755

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12337

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Eric Jensen

Mailing Address 717 Charleston Ct

City Palo Alto State CA Zip Code 94303-4701

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12338

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Jim Protzman

Mailing Address 451 Lakeshore Ln

City Chapel Hill State NC Zip Code 27514-1730

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12339

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4625.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 373 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Fredrick Crow

Mailing Address 2339 Ulen Overlook

City Lebanon State IN Zip Code 46052

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12340

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.00

**B.**

Full Name (Last, First, Middle Initial)  
Mickey Brown

Mailing Address PO Box 607

City Robbins State NC Zip Code 27325-0607

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12341

Date of Disbursement

/   /

Amount of Each Disbursement this Period

704.00

**C.**

Full Name (Last, First, Middle Initial)  
Susan Perine

Mailing Address 36402 NE 139th Ave

City La Center State WA Zip Code 98629-4342

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12342

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3008.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charles Perine

Mailing Address 36402 NE 139th Ave

City State Zip Code  
La Center WA 98629-4342

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12343

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Conlow

Mailing Address 6010 Skyline Blvd

City State Zip Code  
Oakland CA 94611-1045

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12344

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Wade Greene

Mailing Address 35 Charles Street

City State Zip Code  
New York NY 10014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12345

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 375 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Susan P Parris

Mailing Address 102 San Salvador Ln

City State Zip Code  
Santa Fe NM 87501-1740

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12346

Date of Disbursement

/   /

Amount of Each Disbursement this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)  
Nina Jacobson

Mailing Address 9100 Wilshire Blvd  
Sutie 1000W

City State Zip Code  
Beverly Hills CA 90212-3401

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12348

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Melissa Derasmo

Mailing Address 29 Livingston St

City State Zip Code  
Tappan NY 10983-2407

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12349

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4825.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Jeremy Stone	<b>Transaction ID:</b> SB28A-12350 <b>Date of Disbursement</b>																				
Mailing Address 4054 20th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City San Francisco State CA Zip Code 94114	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Richard M Haney, Jr	<b>Transaction ID:</b> SB28A-12351 <b>Date of Disbursement</b>																				
Mailing Address 146 Watson St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Carrollton State GA Zip Code 30117-2964	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>1200.00</td> </tr> </table>	1200.00																			
1200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Franklin Schellenberg	<b>Transaction ID:</b> SB28A-12352 <b>Date of Disbursement</b>																				
Mailing Address 4023 Villa Vis	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Palo Alto State CA Zip Code 94306-3209	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>869.00</td> </tr> </table>	869.00																			
869.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2269.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Richard Armstrong

Mailing Address 105 Pine Ct

City State Zip Code  
Bastrop TX 78602-7416

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12353

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Adelaide Gomer

Mailing Address 513 Wyckoff Rd

City State Zip Code  
Ithaca NY 14850-2309

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12354

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen Hogan

Mailing Address 543 S Muirfield Rd

City State Zip Code  
Los Angeles CA 90020-4825

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12355

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 378 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Henry Walentowicz

Mailing Address 3 Old Farm Ct

City Montville State NJ Zip Code 07045-9200

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12356

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)  
James F Alexander

Mailing Address 3213 Stratford Park Ct

City Charlotte State NC Zip Code 28210-2969

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12357

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Ozaki

Mailing Address 6451 Sundance

City Huntington Beach State CA Zip Code 92647

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12358

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1350.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 379 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lyle Warshauer

Mailing Address 6155 River Chase Cir NW

City State Zip Code  
Sandy Springs GA 30327-4901

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12359

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Earl Gohl

Mailing Address 500 Dahlia St NW

City State Zip Code  
Washington DC 20012-1938

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12360

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.56

**C.**

Full Name (Last, First, Middle Initial)  
Richard Young

Mailing Address 5840 E Waki Rd

City State Zip Code  
Flagstaff AZ 86004-8641

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12361

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2829.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 380 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mr William Randolph

Mailing Address 4512 Alta Vista Way

City State Zip Code  
Knoxville TN 37919-7603

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12362

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

David Massengill

Mailing Address 5653 E Hampton Blvd

City State Zip Code  
Oakland Gardens NY 11364-2017

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12363

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Lonna H Dole Harkrader

Mailing Address 1320 Shepherd St

City State Zip Code  
Durham NC 27707-1647

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12364

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Mary T Albert

Mailing Address 160 Monaco Dr

City State Zip Code  
Redwood City CA 94065-2860

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12365

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Alex Barlow

Mailing Address 1001 Joe Annie St

City State Zip Code  
Houston TX 77019-4004

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12366

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Harkrader

Mailing Address 1320 Shepherd St

City State Zip Code  
Durham NC 27707-1647

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12368

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

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	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Naren Shanker

Mailing Address6345 Balboa Blvd

CityEncinoStateCAZip Code91316-1519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary☐ General  
☐ Other (specify) ▼

State:District:

Category/  
Type

Transaction ID: SB28A-12369

Date of Disbursement

M

M

/

D

D

/

Y

Y

Y

Y

03242008

Amount of Each Disbursement this Period2300.00

B.

Full Name (Last, First, Middle Initial)  
Stephen Cooper

Mailing Address360 Lexington Ave

CityNew YorkStateNYZip Code10017-6502

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary☐ General  
☐ Other (specify) ▼

State:District:

Category/  
Type

Transaction ID: SB28A-12370

Date of Disbursement

M

M

/

D

D

/

Y

Y

Y

Y

03242008

Amount of Each Disbursement this Period1200.00

C.

Full Name (Last, First, Middle Initial)  
Thomas Johnston

Mailing Address4690 Pioneer Rd

CityMedfordStateORZip Code97501

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary☐ General  
☐ Other (specify) ▼

State:District:

Category/  
Type

Transaction ID: SB28A-12371

Date of Disbursement

M

M

/

D

D

/

Y

Y

Y

Y

03242008

Amount of Each Disbursement this Period200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

**3700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 383 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey A Kaiser

Mailing Address 640 Appaloosa Dr

City Walnut Creek State CA Zip Code 94596-6540

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12372

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Dearman

Mailing Address 150 N University Dr  
Ste 200

City Plantation State FL Zip Code 33324-2008

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12373

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Marianne Fogarty

Mailing Address 1124 Clay Ave

City Pelham State NY Zip Code 10803-3205

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12374

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 384 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Waheed Akbar

Mailing Address 580 Golfview Dr

City State Zip Code  
Saginaw MI 48638-5869

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12375

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas J Brandi

Mailing Address 44 Montgomery St  
Ste 1050

City State Zip Code  
San Francisco CA 94104-4621

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12376

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Raana W Akbar

Mailing Address 4701 Towne Centre Rd  
Ste 304

City State Zip Code  
Saginaw MI 48604-2833

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12377

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Maya Saxena

Mailing Address 2500 NE 51st St

City  
Lighthouse Point

State  
FL

Zip Code  
33064-7046

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12378

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Troy D Chandler

Mailing Address 13411 Bedford Chase

City  
Cypress

State  
TX

Zip Code  
77429-7215

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12379

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

J T Inglefield

Mailing Address 510 11th Avenue PI NW

City  
Hickory

State  
NC

Zip Code  
28601-3600

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12380

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 386 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jonathan Gertler

Mailing Address 42 Miller Ave

City State Zip Code  
Mill Valley CA 94941-1904

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12381

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms Lorraine F Hunton

Mailing Address 289 Orangeburgh Rd

City State Zip Code  
Old Tappan NJ 07675-7436

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12382

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Bernard J Hargadon, Jr

Mailing Address 435 S Tryon St  
Unit 606

City State Zip Code  
Charlotte NC 28202-1907

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12383

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) James Duff Mailing Address 2420 Chislehurst Dr	<b>Transaction ID:</b> SB28A-12384 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Los Angeles State CA Zip Code 90027-1058 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Laurence C Marlin Mailing Address 3550 Crystal Ct City Miami State FL Zip Code 33133-4036 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12385 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2100.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Daniel A Sasse Mailing Address 2116 Pacific Coast Hwy City Huntington Beach State CA Zip Code 92648-3955 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12386 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**6700.00**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
J Shale Martin

Mailing Address 2200 Guy Rd

City State Zip Code  
Clayton NC 27520-8261

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12387

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)  
Elizabeth L Aitken

Mailing Address 3 Imperial Promenade  
Ste 800

City State Zip Code  
Santa Ana CA 92707-5919

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12388

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Ms Daina I Delgado

Mailing Address 1526 Morganton Rd

City State Zip Code  
Fayetteville NC 28305-4771

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12389

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 389 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Denise Abrams

Mailing Address 1515 Arch St

City Berkeley State CA Zip Code 94708-1828

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12390

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms Rebecca A Inglefield

Mailing Address 510 11th Avenue PI NW

City Hickory State NC Zip Code 28601-3600

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12391

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
D Lawrence Wobbrock

Mailing Address 2151 Crest Dr

City Lake Oswego State OR Zip Code 97034-2719

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12392

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 390 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Peggy Jo Wobbrock

Mailing Address 2151 Crest Dr

City State Zip Code  
Lake Oswego OR 97034-2719

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12393

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Matina R Kolokotronis

Mailing Address 560 Rodante Way

City State Zip Code  
Sacramento CA 95864-7235

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12394

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Sherri S Kehoe

Mailing Address 8405 Eagle Crest Ln

City State Zip Code  
Indianapolis IN 46234-9530

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12395

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Nick Monios

Mailing Address 2818 Monogram Ave

City Long Beach State CA Zip Code 90815-1536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12396

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Jon B Streeter

Mailing Address 3125 Claremont Ave

City Berkeley State CA Zip Code 94705-2707

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12397

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Cynthia Chihak Denton

Mailing Address 12550 High Bluff Dr Ste 150

City San Diego State CA Zip Code 92130

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12398

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Katherine Conlow

Mailing Address 6010 Skyline Blvd

City Oakland State CA Zip Code 94611-1045

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12399

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Susan Mcclanahan

Mailing Address 109 Longwood Dr

City Chapel Hill State NC Zip Code 27514-9502

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12400

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Sandra Robinson

Mailing Address 1359 Kalmia Rd NW

City Washington State DC Zip Code 20012-1444

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12401

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
J D Lee

Mailing Address 422 S Gay St

City Knoxville State TN Zip Code 37902-1144

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12402

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs Kelly M Roemer

Mailing Address 900 El Rincon Rd

City Danville State CA Zip Code 94526-3523

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12403

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1025.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr William A Levin

Mailing Address 25 Ahab Dr

City Muir Beach State CA Zip Code 94965-9712

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12404

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5625.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David Anderson

Mailing Address 212 Rush Landing Rd

City Novato State CA Zip Code 94945-2469

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12405

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Corbett

Mailing Address 718 2nd Ave Apt 8

City New York State NY Zip Code 10016-2905

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12406

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1370.00

**C.**

Full Name (Last, First, Middle Initial)  
Diane Maher

Mailing Address 631 W Morse Blvd Ste 200

City Winter Park State FL Zip Code 32789-3730

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12407

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5970.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mark Finkel

Mailing Address 662 Howard Ave

City  
West Hempstead

State  
NY

Zip Code  
11552-3524

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12408

Date of Disbursement

/   /

Amount of Each Disbursement this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

Gary Douglas

Mailing Address 1623 3rd Ave Apt 22A

City  
New York

State  
NY

Zip Code  
10128-3693

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12409

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Amy Morton

Mailing Address 109 Carriage Way

City  
Macon

State  
GA

Zip Code  
31210-8624

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12410

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2620.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Janice Perey

Mailing Address 4568 W Cramer St

City State Zip Code  
Seattle WA 98199-1011

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12414

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

W Fred Orr, II

Mailing Address 1 W Court Sq Ste 710

City State Zip Code  
Decatur GA 30030-2535

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12416

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Dr Ishtiaq A Khan

Mailing Address 2777 Ridgewood Rd NW

City State Zip Code  
Atlanta GA 30327-1922

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12417

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John P Freeman

Mailing Address 2329 Wilmot Ave

City Columbia State SC Zip Code 29205-3164

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12418

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Saket P Shailendra

Mailing Address 1875 Anjaco Rd NW

City Atlanta State GA Zip Code 30309-1807

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12419

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph F Rice

Mailing Address 676 Olde Salt Run

City Mt Pleasant State SC Zip Code 29464-2788

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12420

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
M Shailendra

Mailing Address 3129 Pier II

City Jonesboro State GA Zip Code 30236-4153

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12421

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kiran Shailendra

Mailing Address 3129 Pier II

City Jonesboro State GA Zip Code 30236-4153

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12422

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Erin E Comerford

Mailing Address 3500 Stonegate Ct

City Winston Salem State NC Zip Code 27104-1824

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12424

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4680.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 400 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Margaret S Corboy

Mailing Address 26 Woodley Rd

City Winnetka State IL Zip Code 60093-3738

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12425

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Philip Harnett Corboy, JR

Mailing Address 26 Woodley Rd

City Winnetka State IL Zip Code 60093-3738

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12426

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey M Goldberg

Mailing Address 20 N Clark St Ste 3100

City Chicago State IL Zip Code 60602-5022

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12427

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 401 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Susan Stern

Mailing Address 120 Coquina Dr

City Wilmington State NC Zip Code 28411-9327

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12428

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Donald R Bryan

Mailing Address 607 Aberdeen Dr

City Chapel Hill State NC Zip Code 27516-4459

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12429

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Roy E Barnes

Mailing Address PO Box 161

City Mableton State GA Zip Code 30126-0161

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12430

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Steven J Toll

Mailing Address 9120 Kittery Ln

City Bethesda State MD Zip Code 20817-2139

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12431

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Keith A Hebeisen

Mailing Address 2828 Woodmere Ct

City Northbrook State IL Zip Code 60062-6447

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12432

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jodi B Hebeisen

Mailing Address 2828 Woodmere Ct

City Northbrook State IL Zip Code 60062-6447

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12433

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Susan V Power

Mailing Address 344 W Wellington Ave

City Chicago State IL Zip Code 60657-5637

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12434

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Maureen A Strafford

Mailing Address 24 Coolidge Hill Rd

City Cambridge State MA Zip Code 02138-5527

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12435

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Dennis R Erdman

Mailing Address 1 Central Park W

City New York State NY Zip Code 10023-7703

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12436

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 404 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joseph W Cotchett

Mailing Address 840 Malcolm Rd

City State Zip Code  
Burlingame CA 94010-1401

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12438

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert B Ingram

Mailing Address 4340 Redwood Hwy Ste 352

City State Zip Code  
San Rafael CA 94903-2127

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12439

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Katherine R Ness

Mailing Address 2672 Railroad Ave

City State Zip Code  
Bamberg SC 29003-1778

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12440

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Louis M Tarasi, Jr

Mailing Address 1 Way Hollow Rd

City State Zip Code  
Sewickley PA 15143-1192

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12441

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Ellen Lake

Mailing Address 4230 Lakeshore Ave

City State Zip Code  
Oakland CA 94610-1136

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12442

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Dean Fealk

Mailing Address 151 Alice B Toklas Pl  
Apt 609

City State Zip Code  
San Francisco CA 94109-6961

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12443

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 406 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John Feder

Mailing Address 111 Bay Way

City State Zip Code  
San Rafael CA 94901-2476

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12444

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Whitney Hoyt

Mailing Address 332 Donahue St

City State Zip Code  
Sausalito CA 94965-1033

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12445

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Courtney M Benham

Mailing Address 75 Vasco Ct

City State Zip Code  
Mill Valley CA 94941-4304

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12446

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 407 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
WM Curtis Barnes, Jr

Mailing Address 5 Starlight Isle

City Ladera Ranch State CA Zip Code 92694-1467

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12447

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Leo Lee

Mailing Address 61 Fremont Pl

City Los Angeles State CA Zip Code 90005-3857

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12448

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
William McLucas

Mailing Address 1950 Virginia Ave

City Mc Lean State VA Zip Code 22101-4936

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12449

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 408 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sharon Perlmutter Gavin

Mailing Address 1375 Goucher St

City State Zip Code  
Pacific Palisades CA 90272-2622

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12450

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark A Perry

Mailing Address PO Box 12885

City State Zip Code  
Raleigh NC 27605-2885

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12451

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Donna Scott

Mailing Address 1500 Seabright Pl

City State Zip Code  
Beverly Hills CA 90210-2127

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12452

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 409 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mary Jo Meinke

Mailing Address 9515 Hartford Cir

City State Zip Code  
Eden Prairie MN 55347-3149

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12453

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Nancy Newman Elghanayan

Mailing Address 998 5th Ave

City State Zip Code  
New York NY 10028-0102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12454

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Marcus Levin

Mailing Address 111 Longfellow Rd

City State Zip Code  
Mill Valley CA 94941-1574

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12455

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 410 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Laurel L Simes

Mailing Address 25 Ahab Dr

City State Zip Code  
Muir Beach CA 94965-9712

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12456

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ricardo Cedillo

Mailing Address 755 E Mulberry Ave Ste 500

City State Zip Code  
San Antonio TX 78212-3135

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12457

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
William Caroselli

Mailing Address 108 Woodland Rd

City State Zip Code  
Pittsburgh PA 15232-2816

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12458

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 411 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Edwin H. Beachler, III

Mailing Address 5660 Darlington Rd

City Pittsburgh State PA Zip Code 15217-1510

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12459

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Brett Ratner

Mailing Address 16030 Ventura Blvd

City Encino State CA Zip Code 91436-2731

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12460

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark C Molumphy

Mailing Address 211 W Bellevue Ave

City San Mateo State CA Zip Code 94402-1101

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12461

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 412 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Niall McCarthy Mailing Address 15 Vista Ln	<b>Transaction ID:</b> SB28A-12462 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Burlingame State CA Zip Code 94010-5934 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Philip Lawrence Gregory Mailing Address 1250 Godetia Dr City Woodside State CA Zip Code 94062-4163 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12463 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Susman Mailing Address 2021 Kirby Dr # 85 City Houston State TX Zip Code 77019-6015 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12464 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**6900.00**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 413 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Silver	<b>Transaction ID:</b> SB28A-12465 <b>Date of Disbursement</b>																				
Mailing Address 95 Wild Duck Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Stamford State CT Zip Code 06903-3628	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Moscone	<b>Transaction ID:</b> SB28A-12466 <b>Date of Disbursement</b>																				
Mailing Address 35 Laverne Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Mill Valley State CA Zip Code 94941-3426	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Darcy Hicks	<b>Transaction ID:</b> SB28A-12467 <b>Date of Disbursement</b>																				
Mailing Address 1 Harding Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Westport State CT Zip Code 06880-5105	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**5600.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 414 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Joshua Koskoff

Mailing Address 1 Harding Ln

City State Zip Code  
Westport CT 06880-5105

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12468

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
James F Early

Mailing Address 38 Hunting Hill Rd

City State Zip Code  
Woodbridge CT 06525-1929

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12469

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Judith Hannan

Mailing Address 1133 5th Ave

City State Zip Code  
New York NY 10128-0123

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12470

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Paul B Schmidt

Mailing Address 347 E Palace Ave

City State Zip Code  
Santa Fe NM 87501-2275

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12471

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Ware Killorin

Mailing Address 5587 Benton Woods Dr NE

City State Zip Code  
Atlanta GA 30342-1308

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12472

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

C Woodrow Teague

Mailing Address PO Box 19207

City State Zip Code  
Raleigh NC 27619-9207

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12473

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 416 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Beth Lepinski	<b>Transaction ID:</b> SB28A-12474 <b>Date of Disbursement</b>																				
Mailing Address 222 E North St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Appleton State WI Zip Code 54911-5454	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Spencer Hosie	<b>Transaction ID:</b> SB28A-12475 <b>Date of Disbursement</b>																				
Mailing Address 331 Golden Gate Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Belvedere State CA Zip Code 94920-2444	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Toben	<b>Transaction ID:</b> SB28A-12476 <b>Date of Disbursement</b>																				
Mailing Address 8300 Pickards Meadow Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Chapel Hill State NC Zip Code 27516-4861	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3400.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 417 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ronald L Motley

Mailing Address 787 Navigators Run

City State Zip Code  
Mount Pleasant SC 29464-6620

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12477

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Jerome Kohlberg

Mailing Address 155 Crow Hill Rd

City State Zip Code  
Mount Kisco NY 10549-3803

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12478

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Nancy Kohlberg

Mailing Address 111 Radio Circle Dr

City State Zip Code  
Mount Kisco NY 10549-2609

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12479

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 418 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John Wilson

Mailing Address 5007 Dunwoody Trl

City Raleigh State NC Zip Code 27606-1762

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12481

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Nathaniel Toben

Mailing Address 207 Waterside Dr

City Carrboro State NC Zip Code 27510-1288

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Lynda Goldberg

Mailing Address 111 Burnwood Ct

City Chapel Hill State NC Zip Code 27514-9514

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12483

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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PAGE 419 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Lerach

Mailing Address 9776 La Jolla Farms Rd

City La Jolla State CA Zip Code 92037-1133

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12484

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephanie M Cook

Mailing Address 787 Navigators Run

City Mount Pleasant State SC Zip Code 29464-6620

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12485

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Wade H Tomlinson

Mailing Address 840 Cooper Ave

City Columbus State GA Zip Code 31906-3502

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12486

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Gilbert L Purcell

Mailing Address 222 Rush Landing Rd

City Novato State CA Zip Code 94945-2469

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12487

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Donna H Humphreys

Mailing Address 1616 Kirklee Rd

City Charleston State WV Zip Code 25314-2427

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12488

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Warner

Mailing Address 1600 4th Ave  
Ste 410

City Rock Island State IL Zip Code 61201-8632

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12489

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Duncan A. McMillan

Mailing Address 908 W Johnson St

City  
Raleigh

State  
NC

Zip Code  
27605-1762

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12490

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen Tillery

Mailing Address 701 Market St Ste 300

City  
Saint Louis

State  
MO

Zip Code  
63101-1825

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12491

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Joe D Satterley

Mailing Address 2020 Village Dr

City  
Louisville

State  
KY

Zip Code  
40205-1920

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12492

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 422 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ann M Delaney

Mailing Address 4445 N Washington Blvd

City Indianapolis State IN Zip Code 46205-1767

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12493

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Katherine A. Rogerson

Mailing Address 470 Hocutt Farm Dr

City Clayton State NC Zip Code 27527-3750

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12494

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

James H Voyles, Jr

Mailing Address 10895 Zionsville Rd

City Zionsville State IN Zip Code 46077-9478

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12495

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 423 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James C Holcomb, Jr

Mailing Address 3406 Lovers Ln

City Dallas State TX Zip Code 75225-7630

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12496

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James O McDonald

Mailing Address 8305 N Coal Creek Pl

City West Terre Haute State IN Zip Code 47885-8001

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12497

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary B Ramey

Mailing Address 8624 Bay Colony Dr

City Indianapolis State IN Zip Code 46234-2912

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12498

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Kimberly N Garmer

Mailing Address 1513 Lakewood Dr

City Lexington State KY Zip Code 40502-2533

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12499

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1049.09

**B.**

Full Name (Last, First, Middle Initial)

William Winingham, Jr

Mailing Address 10368 High Grv

City Carmel State IN Zip Code 46032-8302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12500

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph A Power, Jr

Mailing Address 344 W Wellington Ave

City Chicago State IL Zip Code 60657-5637

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12501

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4349.09

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Russell W Budd

**Transaction ID:** SB28A-12502

Date of Disbursement

/   /

Mailing Address 3707 Crescent Ave

City State Zip Code  
Dallas TX 75205-3815

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Dorothy A Budd

**Transaction ID:** SB28A-12503

Date of Disbursement

/   /

Mailing Address 3707 Crescent Ave

City State Zip Code  
Dallas TX 75205-3815

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

K J Kubin

**Transaction ID:** SB28A-12504

Date of Disbursement

/   /

Mailing Address 2100 Pacific Ave

City State Zip Code  
San Francisco CA 94115-1546

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 426 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Paul Rexford Thatcher

Mailing Address 19 S 1st St Ste 18907B

City Minneapolis State MN Zip Code 55401-1839

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12505

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David Helbach

Mailing Address 16 Peregrine Ct

City Verona State WI Zip Code 53593-7848

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12506

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Stacie L Roth

Mailing Address 3016 Whitacre Ave SE

City Minerva State OH Zip Code 44657-9195

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12507

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 427 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Grant L Davis

Mailing Address PO Box 26250

City State Zip Code  
Kansas City MO 64196-6250

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12508

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Harry Huge

Mailing Address 25 E Battery St

City State Zip Code  
Charleston SC 29401-2740

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12509

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph R Saveri

Mailing Address 999 Green St Apt 2504

City State Zip Code  
San Francisco CA 94133-5403

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 428 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David J. McMorris

Mailing Address 89 Doane St

City Cohasset State MA Zip Code 02025-1514

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12511

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
John T Barrett

Mailing Address 17 Ridgefield Rd

City Winchester State MA Zip Code 01890-3917

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12512

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael P Thorton

Mailing Address 26 Eaton Ct

City Wellesley State MA Zip Code 02481-7622

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12513

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charles W. Byrd

Mailing Address PO Box 218

City Reynolds State GA Zip Code 31076-0218

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-12514

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael J. Moore

Mailing Address 3584 Valley Dr

City Perry State GA Zip Code 31069-6930

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-12515

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Winifred R Kenley

Mailing Address 1601 N Fuller Ave Apt 202

City Los Angeles State CA Zip Code 90046-3575

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-12516

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Eugene E Stearns

Mailing Address 180 Cape Florida Dr

City State Zip Code  
Key Biscayne FL 33149-2709

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12517

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Duke R Groover

Mailing Address 2417 Clayton St

City State Zip Code  
Macon GA 31204-2911

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12518

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Alexander D Alben

Mailing Address 180 Lake Washington Blvd E

City State Zip Code  
Seattle WA 98112-5034

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12519

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 431 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mark De Matteri

Mailing Address 1631 University Way

City San Jose State CA Zip Code 95126-1555

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12520

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Claviria Vasquir

Mailing Address 867 Alta Lama Ave

City Daly City State GA Zip Code 94015

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12521

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Kent M Swig

Mailing Address 770 Lexington Ave

City New York State NY Zip Code 10021-8165

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12522

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 432 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Amanda McClintock

Mailing Address 332 19th St

City State Zip Code  
Manhattan Beach CA 90266-4513

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12523

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Thomas V Girardi

Mailing Address 100 Los Altos Dr

City State Zip Code  
Pasadena CA 91105-1240

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12524

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Erika Girardi

Mailing Address 100 Los Altos Dr

City State Zip Code  
Pasadena CA 91105-1240

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12525

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 433 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Diana D Stearns

Mailing Address 180 Cape Florida Dr

City State Zip Code  
Key Biscayne FL 33149-2709

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Lee Johnson

Mailing Address 6201 E Calle Camelia

City State Zip Code  
Scottsdale AZ 85251-4208

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12527

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Diane Zelcs

Mailing Address 509 Elm Rd

City State Zip Code  
Barrington IL 60010-3125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12528

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 434 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Gustafson

Mailing Address 20840 Engen Blvd NW

City Elk River State MN Zip Code 55330-8017

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12529

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Fred T Isquith

Mailing Address 270 Madison Ave

City New York State NY Zip Code 10016-0601

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12530

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard K Robbins

Mailing Address 1120 Nye St Ste 400

City San Rafael State CA Zip Code 94901-2946

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12531

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 435 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Steve Sidener</p> <p>Mailing Address 595 Market St Ste 2300</p> <p>City San Francisco State CA Zip Code 94105-2835</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-12532</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1150.00</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Daniel J Furniss</p> <p>Mailing Address 415 Remillard Dr</p> <p>City Hillsborough State CA Zip Code 94010-6737</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-12533</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Daniel U Smith</p> <p>Mailing Address 21 Rancheria Rd</p> <p>City Kentfield State CA Zip Code 94904-2833</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-12534</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

5750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Mr Jeffrey Wihtol	<b>Transaction ID:</b> SB28A-12535 <b>Date of Disbursement</b>																				
Mailing Address 620 SW Main St Ste 602	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Portland State OR Zip Code 97205-3024	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">700.00</td> </tr> </table>	700.00																			
700.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Sachin Shailendra	<b>Transaction ID:</b> SB28A-12536 <b>Date of Disbursement</b>																				
Mailing Address 1875 Anjaco Rd NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Atlanta State GA Zip Code 30309-1807	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Pat McGregor	<b>Transaction ID:</b> SB28A-12537 <b>Date of Disbursement</b>																				
Mailing Address 1506 S Perry St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Montgomery State AL Zip Code 36104-5604	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3200.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 437 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Scott Ginsburg

Mailing Address 4707 Park Ln

City State Zip Code  
Dallas TX 75220-2026

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12538

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Susan E Gravely

Mailing Address 377 Tenney Cir

City State Zip Code  
Chapel Hill NC 27514-7806

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12539

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Israel Roizman

Mailing Address 6 Mimosa Cir

City State Zip Code  
Lafayette Hill PA 19444-2407

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12540

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 438 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Edward O Delaney	<b>Transaction ID:</b> SB28A-12541 <b>Date of Disbursement</b>																				
Mailing Address 4445 Washington Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Indianapolis State IN Zip Code 46205-1767	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Bonnie Bieder	<b>Transaction ID:</b> SB28A-12542 <b>Date of Disbursement</b>																				
Mailing Address 19 Millertown Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Bedford State NY Zip Code 10506-1304	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Diane T Pitre	<b>Transaction ID:</b> SB28A-12543 <b>Date of Disbursement</b>																				
Mailing Address 729 Chiltern Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Hillsborough State CA Zip Code 94010-7025	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Yoshiko Kasuga Mailing Address 507 E 12th St Apt 4A	<b>Transaction ID:</b> SB28A-12544 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City New York State NY Zip Code 10009-3850 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>204.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Paul Mariano Mailing Address 1000 W Arlington St City Martinez State CA Zip Code 94553-2351 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12545 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew Specter Mailing Address 1615 Kenyon St NW Apt 41 City Washington State DC Zip Code 20010-2743 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12546 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3504.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 440 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Nancy Polikoff	<b>Transaction ID:</b> SB28A-12547 <b>Date of Disbursement</b>																				
Mailing Address 2904 Garfield Ter NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Washington State DC Zip Code 20008-3507	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Sarah Sima McCann	<b>Transaction ID:</b> SB28A-12548 <b>Date of Disbursement</b>																				
Mailing Address 1508 N Grand Oaks Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Pasadena State CA Zip Code 91104-1910	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mary E Provost	<b>Transaction ID:</b> SB28A-12549 <b>Date of Disbursement</b>																				
Mailing Address 25 Circle Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Greenwich State CT Zip Code 06830-6737	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

4850.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Luella F Ferraro Mailing Address 98 Valleywood Rd	<b>Transaction ID:</b> SB28A-12550 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Cos Cob CT 06807-2321 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Tarsem Gupta Mailing Address 313 Broadmoor Way City State Zip Code McDonough GA 30253-4290 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12551 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) kiran Gupta Mailing Address 313 Broadmoor Way City State Zip Code McDonough GA 30253-4290 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12552 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**6900.00**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Danny Blue

Mailing Address 1916 Overland Ave Apt 4

City State Zip Code  
Los Angeles CA 90025-5826

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12553

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kim L Ferraro

Mailing Address 171 Field Point Rd

City State Zip Code  
Greenwich CT 06830-6402

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12554

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jill B O'Callahan

Mailing Address 1437 Club View Dr

City State Zip Code  
Los Angeles CA 90024-5305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12555

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 443 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James G O'Callahan

Mailing Address 1437 Club View Dr

City Los Angeles State CA Zip Code 90024-5305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12556

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David R Lira

Mailing Address 420 S Hill Ave

City Pasadena State CA Zip Code 91106-3460

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12557

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert M Keese

Mailing Address 2117 San Antonio Dr

City Montebello State CA Zip Code 90640-2450

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12558

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 444 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
John Courtney

Mailing Address 2054 Monterey Blvd

City Hermosa Beach State CA Zip Code 90254-2912

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12559

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Patricia C Courtney

Mailing Address 2054 Monterey Blvd

City Hermosa Beach State CA Zip Code 90254-2912

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12560

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Larry E Safir

Mailing Address 801 N Jackson Rd

City McAllen State TX Zip Code 78501-9306

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12561

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 445 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Mark Fife

Mailing Address 13 E 75th St

City State Zip Code  
New York NY 10021-2608

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12562

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Robert W Finnerty

Mailing Address 10425 Whipple St

City State Zip Code  
Toluca Lake CA 91602-2808

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12563

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Barry M Blechman

Mailing Address 1717 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20006-4614

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12564

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 446 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Shawn McCann

Mailing Address 1508 N Grand Oaks Ave

City Pasadena State CA Zip Code 91104-1910

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12565

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Linda B Oliver

Mailing Address 3482 N Emerson St

City Arlington State VA Zip Code 22207-1855

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12566

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Julie Finnerty

Mailing Address 10425 Whipple St

City Toluca Lake State CA Zip Code 91602-2808

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12567

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth Bleke Clark

Mailing Address 112 Lagrange Pl

City Macon State GA Zip Code 31210-1472

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12568

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Helen H Keese

Mailing Address 2117 San Antonio Dr

City Montebello State CA Zip Code 90640-2450

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12569

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Lauren Logan Benedict

Mailing Address 360 Vista Cir Apt A

City Macon State GA Zip Code 31204-2494

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12570

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2565.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 448 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Clyde M Collins, JR

Mailing Address 233 E Bay St Ste 920

City Jacksonville State FL Zip Code 32202-3434

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12571

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Landon

Mailing Address 8440 SE 47th Pl

City Mercer Island State WA Zip Code 98040

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12572

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy Oliver

Mailing Address 217 N Pitt St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12573

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1102.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1852.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Pedro Cuatrecasas

Mailing Address 7912 Entrada de Luz E

City San Diego State CA Zip Code 92127-2559

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12574

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)

Tony Korvick

Mailing Address 9655 S Dixie Hwy Ste 208

City Miami State FL Zip Code 33156-2813

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12575

Date of Disbursement

/   /

Amount of Each Disbursement this Period

466.69

**C.**

Full Name (Last, First, Middle Initial)

Charles Schell

Mailing Address 420 Highland Ave

City Hartwell State GA Zip Code 30643-4343

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12576

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3116.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 450 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael Horowitz

Mailing Address 10 Deer Meadow Ln

City State Zip Code  
Stamford CT 06903-1528

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12577

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jill Zelenko-Kuller

Mailing Address 15 Oak Trail Rd

City State Zip Code  
Englewood NJ 07631-5120

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12578

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Irwin Schneiderman

Mailing Address 80 Pine St

City State Zip Code  
New York NY 10005-1702

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12579

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Nelson

Mailing Address 310 W 34th St

City Vancouver State WA Zip Code 98660-1911

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12580

Date of Disbursement

/   /

Amount of Each Disbursement this Period

560.00

**B.**

Full Name (Last, First, Middle Initial)  
Alan Goldfarb

Mailing Address 100 SE 2nd St Fl 39

City Miami State FL Zip Code 33131-2100

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12581

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Al Maloof

Mailing Address 19048 SW 80th Ct

City Miami State FL Zip Code 33157-7430

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12582

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

710.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

M Arwin Parris

Mailing Address 410 Glenwood Ave  
Ste 200

City Raleigh State NC Zip Code 27603-1249

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12583

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Stephanie Fanjul

Mailing Address 1410 Park Dr

City Raleigh State NC Zip Code 27605-1728

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12584

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr Christopher A Seeger

Mailing Address 1 William St Fl 10

City New York State NY Zip Code 10004-2544

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12585

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

**A.**

**B.**

**C.**

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 454 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Cyrus Mehri

Mailing Address 5003 Macarthur Ct NW

City Washington State DC Zip Code 20016-3343

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12589

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Lovell R Olender

Mailing Address 2500 Virginia Ave NW

City Washington State DC Zip Code 20037-1902

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12590

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Jack H Olender

Mailing Address 2500 Virginia Ave NW

City Washington State DC Zip Code 20037-1902

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12591

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 455 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jacqueline Ann Lira

Mailing Address 420 S Hill Ave

City Pasadena State CA Zip Code 91106-3460

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12592

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lori Fife

Mailing Address 13 E 75th St

City New York State NY Zip Code 10021-2608

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12593

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Lenard A Cohen

Mailing Address 125 Old Gulph Rd

City Wynnewood State PA Zip Code 19096-1016

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12594

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

FEC Schedule B ( Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 457 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas O Pyle

Mailing Address 124 Mt Auburn St Ste 200N

City State Zip Code  
Cambridge MA 02138-5787

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12598

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kathy Romas

Mailing Address 1803 S Mannheim Rd

City State Zip Code  
Westchester IL 60154-4320

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Harold Samhat

Mailing Address 267 Woodberry Dr

City State Zip Code  
Bloomfield Hills MI 48304-3563

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12600

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kevin Oakes

Mailing Address 8686 Bolton Ct

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12601

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Susie Roberts

Mailing Address 5227 Jean Ave

City Amarillo State TX Zip Code 79109-4126

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12602

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Susie Purcell

Mailing Address PO Box 2020

City Blanchard State OK Zip Code 73010-2020

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12603

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Barry Kraus

Mailing Address 175 Timber Mill St

City State Zip Code  
The Woodlands TX 77380-0981

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12604

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Kenneth L Sales

Mailing Address 325 Main St  
1900 Waterfront Plaza

City State Zip Code  
Louisville KY 40202

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12605

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)

Ho Chung

Mailing Address 2281 S Pioneer Way

City State Zip Code  
Las Vegas NV 89117-2702

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12606

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

6900.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Joshua C Whetzel, Jr

Mailing Address 5036 Castleman St

City  
Pittsburgh

State  
PA

Zip Code  
15232-2107

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12607

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Peter Neumann

Mailing Address 1 Elm Ct

City  
Reno

State  
NV

Zip Code  
89501-1712

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)

Daniel Berger

Mailing Address 1622 Locust St

City  
Philadelphia

State  
PA

Zip Code  
19103-6305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12609

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James Baumann

Mailing Address 9536 Fayette Ct.

City State Zip Code  
Brentwood TN 37027

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12610

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
Melinda Swanson

Mailing Address 180 Dorrance Rd

City State Zip Code  
Boulder Creek CA 95006-9571

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12611

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Dock Heard Davis

Mailing Address 3232 Frolona Rd

City State Zip Code  
Franklin GA 30217-4228

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12612

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

PAGE 462 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sarah K Mitchell

Mailing Address 51 Dartmoor

City Enfield State CT Zip Code 06082-2249

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12613

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Debra A Moore

Mailing Address 3584 Valley Dr

City Perry State GA Zip Code 31069-6930

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Melanie H Byrd

Mailing Address PO Box 218

City Reynolds State GA Zip Code 31076-0218

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12615

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Dawn Baker Miller

Mailing Address 29 Birch Brook Rd

City State Zip Code  
Bronxville NY 10708-2021

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2380.00

**B.**

Full Name (Last, First, Middle Initial)

Terri Naito

Mailing Address 3410 NE Beakey St

City State Zip Code  
Portland OR 97212-2660

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Christine Vernier

Mailing Address 1558 SW Upper Hall St

City State Zip Code  
Portland OR 97201-2563

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12618

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1650.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David Vernier

Mailing Address 1558 SW Upper Hall St

City Portland State OR Zip Code 97201-2563

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1150.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Jon G Carlson

Mailing Address 1000 Prestonwood Dr

City Edwardsville State IL Zip Code 62025-4139

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12620

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**C.**

Full Name (Last, First, Middle Initial)  
Donald Bruce Kehoe

Mailing Address 8405 Eagle Crest Ln

City Indianapolis State IN Zip Code 46234-9530

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robin Winston

Mailing Address 7453 Quincy Ct

City Indianapolis State IN Zip Code 46254-9673

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Auli Batts

Mailing Address 23 Colgate Rd

City Wellesley State MA Zip Code 02482-7405

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12623

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

**C.**

Full Name (Last, First, Middle Initial)  
Norman M Kaplan

Mailing Address 3831 Turtle Creek Blvd  
Apt 20E

City Dallas State TX Zip Code 75219-4415

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12624

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3600.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President**A.**Full Name (Last, First, Middle Initial)  
Steven Kirsch

Mailing Address 13930 La Paloma Rd

City State Zip Code  
Los Altos Hills CA 94022-2628Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12625

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Amount of Each Disbursement this Period

2300.00

**B.**Full Name (Last, First, Middle Initial)  
Stephen Foley

Mailing Address 75 Meadow Rd

City State Zip Code  
Buffalo NY 14216-3613Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12626

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Amount of Each Disbursement this Period

100.00

**C.**Full Name (Last, First, Middle Initial)  
James ZissonMailing Address 777 S. Flagler Dr. East Tower  
SuiteCity State Zip Code  
West Palm Beach FL 33401Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12627

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

4700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 467 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John M Dangora

Mailing Address 1000 N Lake Shore Plz  
Apt 8A

City Chicago State IL Zip Code 60611-5132

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12628

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Ausman

Mailing Address 1837 Church St

City San Francisco State CA Zip Code 94131-2712

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12629

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)  
Clayton Stouffer

Mailing Address 180 Dorrance Rd

City Boulder Creek State CA Zip Code 95006-9571

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12630

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 468 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Darrell B Carter

Mailing Address 13340 Arnold Dr

City State Zip Code  
Glen Ellen CA 95442-9301

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12631

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert L Habush

Mailing Address 777 E Wisconsin Ave  
Ste 2300

City State Zip Code  
Milwaukee WI 53202-5318

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12632

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Casey Wasserman

Mailing Address 10100 Santa Monica Blvd  
Ste 1300

City State Zip Code  
Los Angeles CA 90067-4003

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12633

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 469 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph E Johnson Mailing Address 14 Provincetown Ct	<b>Transaction ID:</b> SB28A-12634 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Greensboro State NC Zip Code 27408-3871 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Stuart Mills Mailing Address PO Box 1479 City Pinehurst State NC Zip Code 28370-1479 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12635 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) John Jose Mailing Address 3620 Bellaire Dr N City Fort Worth State TX Zip Code 76109-2115 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12636 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>700.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**5300.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 470 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Spivey	<b>Transaction ID:</b> SB28A-12637 <b>Date of Disbursement</b>																				
Mailing Address 2207 Makena Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City State Zip Code Corinth TX 76210-0023	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Simeon J Osborn	<b>Transaction ID:</b> SB28A-12638 <b>Date of Disbursement</b>																				
Mailing Address 2125 5th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City State Zip Code Seattle WA 98121-2510	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) John R Parten	<b>Transaction ID:</b> SB28A-12639 <b>Date of Disbursement</b>																				
Mailing Address 211 Highland Cross Dr Ste 100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City State Zip Code Houston TX 77073-1733	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 471 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Leona Toll

Mailing Address 9120 Kittery Ln

City Bethesda State MD Zip Code 20817-2139

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12640

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kenneth R Feinberg

Mailing Address 5200 Edgemoor Ln

City Bethesda State MD Zip Code 20814-2342

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Diane S Feinberg

Mailing Address 6200 Edgemoor Ln

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 472 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Kate Sako

Mailing Address 7512 Orin Ct N

City State Zip Code  
Seattle WA 98103-4921

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12643

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)  
Mr Walter Ligon

Mailing Address PO Box 106

City State Zip Code  
Pentwater MI 49449-0106

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12644

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

C.

Full Name (Last, First, Middle Initial)  
Mr Archibald S Alexander

Mailing Address 550 Sydes Canyon Spur Rd

City State Zip Code  
Bozeman MT 59715-9369

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12645

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 473 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Marie Foose	<b>Transaction ID:</b> SB28A-12646 <b>Date of Disbursement</b>																				
Mailing Address 1140 Veale Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Martinez State CA Zip Code 94553-2940	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">4.00</td> </tr> </table>	4.00																			
4.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) David Werling	<b>Transaction ID:</b> SB28A-12647 <b>Date of Disbursement</b>																				
Mailing Address 13801 Rivercrest Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Little Rock State AR Zip Code 72212-1520	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">1450.00</td> </tr> </table>	1450.00																			
1450.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Patrice Ratnoff	<b>Transaction ID:</b> SB28A-12648 <b>Date of Disbursement</b>																				
Mailing Address 631 Crocker Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Sacramento State CA Zip Code 95864-5609	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3754.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 474 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Georgianne Levangie

Mailing Address 16030 Ventura Blvd Ste 380

City Encino State CA Zip Code 91436-2778

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12650

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Ahearn

Mailing Address 2281 S Pioneer Way

City Las Vegas State NV Zip Code 89117-2702

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12651

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Fuchs

Mailing Address 60 Greene St

City New York State NY Zip Code 10012-5139

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12652

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 475 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Carmen Pope	<b>Transaction ID:</b> SB28A-12654 <b>Date of Disbursement</b>																				
Mailing Address 817 Adair Ave NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Atlanta State GA Zip Code 30306-3705	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms Marcia Marley	<b>Transaction ID:</b> SB28A-12655 <b>Date of Disbursement</b>																				
Mailing Address 139 Union St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Montclair State NJ Zip Code 07042-2102	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Penny Horowitz	<b>Transaction ID:</b> SB28A-12656 <b>Date of Disbursement</b>																				
Mailing Address 10 Deer Meadow Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Stamford State CT Zip Code 06903-1528	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 476 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Gregg Weinstein

Mailing Address 120 E End Ave Apt 10B

City State Zip Code  
New York NY 10028-7552

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12657

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**B.**

Full Name (Last, First, Middle Initial)

Peter Coyote

Mailing Address 775 E Blithedale Ave

City State Zip Code  
Mill Valley CA 94941-1554

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)

Nieba C Paige

Mailing Address 1322 SE 60th Ave

City State Zip Code  
Portland OR 97215-2807

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

850.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3104.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 477 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joseph F. Vitale

Mailing Address 142 Beverly Hills Ter

City State Zip Code  
Woodbridge NJ 07095-4093

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12660

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kathleen Strickland

Mailing Address 417 Brighton Road

City State Zip Code  
Durham NC 27707

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12661

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Aby Rosen

Mailing Address 5 E 80th St

City State Zip Code  
New York NY 10021-0109

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12662

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 478 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Oliver K Stanton

Mailing Address 1016 5th Ave

City State Zip Code  
New York NY 10028-0132

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12663

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Elise Smith-Dewey

Mailing Address 19350 Ireland Ct

City State Zip Code  
Lakeville MN 55044-7022

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12664

Date of Disbursement

/   /

Amount of Each Disbursement this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)  
Barbara Pierce

Mailing Address 12302 Weddington St

City State Zip Code  
Valley Village CA 91607-2518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2554.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 480 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Vincent P Loduca, Jr

Mailing Address 870 Joseph Gray

City Truckee State CA Zip Code 96161-5120

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12670

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Daidi L Loduca

Mailing Address 870 Joseph Gray

City Truckee State CA Zip Code 96161-5120

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Michael A Bailey

Mailing Address 11638 Dan Maples Drive

City Charlotte State NC Zip Code 28277

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12672

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 481 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Martin Lacoff

Mailing Address 881 Lake Ave

City State Zip Code  
Greenwich CT 06831-3019

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12673

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey H Schwartz

Mailing Address 4200 Rosemary St

City State Zip Code  
Chevy Chase MD 20815-5218

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12674

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Helen Propst Mills

Mailing Address PO Box 1479

City State Zip Code  
Pinehurst NC 28370-1479

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 482 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robin R Rudell

Mailing Address 146 Wilder Ave

City State Zip Code  
Los Gatos CA 95030-5924

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12676

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Steven J Weber

Mailing Address 3939 Sacramento St

City State Zip Code  
San Francisco CA 94118-1627

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12677

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michelle Russell

Mailing Address 520 E 76th St PH D

City State Zip Code  
New York NY 10021-3170

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12678

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 483 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Neva Huffaker	<b>Transaction ID:</b> SB28A-12679 <b>Date of Disbursement</b>																				
Mailing Address 375 Majestic View Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Boulder State CO Zip Code 80303-4503	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kim Hjort	<b>Transaction ID:</b> SB28A-12681 <b>Date of Disbursement</b>																				
Mailing Address 6702 Old Chesterbrook Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City McLean State VA Zip Code 22101-4404	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">350.00</td> </tr> </table>	350.00																			
350.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Scott A Bommer	<b>Transaction ID:</b> SB28A-12682 <b>Date of Disbursement</b>																				
Mailing Address 1040 5th Ave Apt 14A	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10028-0137	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2200.00</td> </tr> </table>	2200.00																			
2200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 484 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Donald Deutsch

Mailing Address 111 8th Ave Fl 4

City State Zip Code  
New York NY 10011-5205

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12683

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2200.00

**B.**

Full Name (Last, First, Middle Initial)

Kristen J Del Biaggio

Mailing Address 20801 Scenic Vista Dr

City State Zip Code  
San Jose CA 95120-1215

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12684

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Robin Anne Floyd

Mailing Address 5003 Macarthur Ct NW

City State Zip Code  
Washington DC 20016-3343

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12685

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 485 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Karen Brandenburg

Mailing Address 1122 Willow St Ste 200

City San Jose State CA Zip Code 95125-3103

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12686

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Carol Brandi

Mailing Address 239 Grattan St

City San Francisco State CA Zip Code 94117-4210

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Diane M Brandenburg

Mailing Address 16035 Greenwood Rd

City Monte Sereno State CA Zip Code 95030-3016

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12688

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Eric Brandenburg

Mailing Address 1887 Camino A Los Cerros

City Menlo Park State CA Zip Code 94025-5918

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12689

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lee H Brandenburg

Mailing Address 16035 Greenwood Rd

City Monte Sereno State CA Zip Code 95030-3016

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12690

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Kristy Brandenburg

Mailing Address 1887 Camino A Los Cerros

City Menlo Park State CA Zip Code 94025-5918

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12691

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 487 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Brandenburg

Mailing Address 1122 Willow St Ste 200

City State Zip Code  
San Jose CA 95125-3103

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12692

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
William Del Biaggio

Mailing Address 20801 Scenic Vista Dr

City State Zip Code  
San Jose CA 95120-1215

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12693

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Kamy Wicoff

Mailing Address 105 Hudson St 6N

City State Zip Code  
New York NY 10013

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12694

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

Full Name (Last, First, Middle Initial)  
Eleanore Levin

03 / 24 / 2008

2300.00

Category/  
Type

State:  District:

Full Name (Last, First, Middle Initial)  
Donald Levin

03 / 24 / 2008

2300.00

Category/  
Type

State:  District:

Full Name (Last, First, Middle Initial)  
Marion Hindin

2000.00

Category/  
Type

State:  District:

**6600.00**

FEC Schedule B ( Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 489 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Melanie Cross	<b>Transaction ID:</b> SB28A-12698 <b>Date of Disbursement</b>																				
Mailing Address 4170 Old Adobe Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Palo Alto State CA Zip Code 94306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">149.00</td> </tr> </table>	149.00																			
149.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Timothy Aldrete	<b>Transaction ID:</b> SB28A-12699 <b>Date of Disbursement</b>																				
Mailing Address 1040 E Wardlow Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Long Beach State CA Zip Code 90807-4708	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>	30.00																			
30.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey G Davis	<b>Transaction ID:</b> SB28A-12700 <b>Date of Disbursement</b>																				
Mailing Address 11 W 20th St Fl 7	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10011-3704	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">1700.00</td> </tr> </table>	1700.00																			
1700.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1879.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 490 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Stephen Monson

Mailing Address 11 Windingbrook Rd

City Bordentown State NJ Zip Code 08505-3152

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12701

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**B.**

Full Name (Last, First, Middle Initial)  
Curtis H Sitterson

Mailing Address 150 W Flagler St  
Ste 2200

City Miami State FL Zip Code 33130-1536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12702

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Charles Rosin

Mailing Address 938 Malcolm Ave

City Los Angeles State CA Zip Code 90024-3114

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12703

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 491 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Syed Enam

Mailing Address 351 N Post Oak Ln Apt 605

City State Zip Code  
Houston TX 77024-5920

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12704

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Brian J McDonough

Mailing Address 77 Lagorce Cir

City State Zip Code  
Miami Beach FL 33141-4519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12705

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Georgia McDonough

Mailing Address 77 Lagorce Cir

City State Zip Code  
Miami Beach FL 33141-4519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12706

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 492 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Jay B Shapiro Mailing Address 10102 SW 57th Ct	<b>Transaction ID:</b> SB28A-12707 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Pinecrest State FL Zip Code 33156-2078 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Susan Klein Shapiro Mailing Address 10102 SW 57th Ct City Pinecrest State FL Zip Code 33156-2078 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12708 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Teresa Van Camp Mailing Address 210 Weymouth Rd City Southern Pines State NC Zip Code 28387-5735 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12709 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

6900.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 493 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Robert Kientz

Mailing Address 311 W 5th St

City Austin State TX Zip Code 78701-2997

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12710

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
David C Pollack

Mailing Address 150 W Flagler St

City Miami State FL Zip Code 33130-1536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12711

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Trudi Pollack

Mailing Address 150 W Flagler St

City Miami State FL Zip Code 33130-1536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12712

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

6900.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 494 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert Sharp

Mailing Address 401 E 80th St  
Apt 8B

City New York State NY Zip Code 10021-0685

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12713

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**B.**

Full Name (Last, First, Middle Initial)  
Penny Shane

Mailing Address 39 Vestry St  
Apt 1B

City New York State NY Zip Code 10013-1767

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12714

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
L J Miller

Mailing Address 60 Carlton Rd

City Waban State MA Zip Code 02468-1914

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12715

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 495 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Mary Bartol

Mailing Address PO Box 1032

City State Zip Code  
Sonoita AZ 85637-1032

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12716

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Maureen N Byrne

Mailing Address 11 Glenn Ln

City State Zip Code  
York ME 03909-1431

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

**C.**

Full Name (Last, First, Middle Initial)  
Marianna Grossman Keller

Mailing Address 3881 Corina Way

City State Zip Code  
Palo Alto CA 94303-4507

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12718

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 496 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Gordon A MacInnes

Mailing Address 26 Harter Rd

City State Zip Code  
Morristown NJ 07960-6336

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12719

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark Dikeman

Mailing Address 6830 Royal Orchid Cir

City State Zip Code  
Delray Beach FL 33446-4339

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12720

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Beverly Dikeman

Mailing Address 6830 Royal Orchid Cir

City State Zip Code  
Delray Beach FL 33446-4339

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12721

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert T Kofman

Mailing Address 20201 E Country Club Dr  
Unit 1501

City State Zip Code  
Aventura FL 33180-3008

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12722

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David Israel

Mailing Address 161 E Chicago Ave

City State Zip Code  
Chicago IL 60611-2601

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12723

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Piero Desidero

Mailing Address 954 Lake Wyman Rd

City State Zip Code  
Boca Raton FL 33431-7807

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12724

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Jerry L Brown	<b>Transaction ID:</b> SB28A-12725 <b>Date of Disbursement</b>																				
Mailing Address 7622 N Sunset Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Saint Louis State MO Zip Code 63121-2428	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2200.00</td> </tr> </table>	2200.00																			
2200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Elliot M Brown	<b>Transaction ID:</b> SB28A-12726 <b>Date of Disbursement</b>																				
Mailing Address 7622 N Sunset Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Saint Louis State MO Zip Code 63121-2428	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2200.00</td> </tr> </table>	2200.00																			
2200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Robert D Horvath	<b>Transaction ID:</b> SB28A-12727 <b>Date of Disbursement</b>																				
Mailing Address 2422 Tracy Pl NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Washington State DC Zip Code 20008-1627	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Starr Scuderi

Mailing Address 1208 W Huron St

City Chicago State IL Zip Code 60622-5725

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12728

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Bryan Moody

Mailing Address 417 Camelot Dr

City Collinsville State IL Zip Code 62234-4716

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12729

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Julia J Daniels

Mailing Address 1515 Glenwood Ave

City Raleigh State NC Zip Code 27608-2337

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12730

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
David Salinal

Mailing Address 1825 N Winnebago Ave

City Chicago State IL Zip Code 60647-6284

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12731

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
George Zelcs

Mailing Address 509 Elm Rd

City Barrington State IL Zip Code 60010-3125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Katherine tillery

Mailing Address 34 Country Club PI

City Belleville State IL Zip Code 62223-1931

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12733

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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PAGE 501 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Alexis Tillery

Mailing Address 1623 N Bell Ave

City  
Chicago

State  
IL

Zip Code  
60647-5427

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12734

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Christine Moody

Mailing Address 417 Camelot Dr

City  
Collinsville

State  
IL

Zip Code  
62234-4716

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12735

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

John Libra

Mailing Address 1623 N Bell Ave

City  
Chicago

State  
IL

Zip Code  
60647-5427

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12736

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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PAGE 502 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Steven Katz

Mailing Address 8198 Boyne City Rd

City State Zip Code  
Charlevoix MI 49720-9497

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Terry L Goodin

Mailing Address 28760 N 83rd St

City State Zip Code  
Scottsdale AZ 85262-2216

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12738

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**C.**

Full Name (Last, First, Middle Initial)  
Donald Flack

Mailing Address 57 Woodcrest Dr

City State Zip Code  
Bethalto IL 62010-2194

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 503 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jerome Glick

Mailing Address 18 S Central Ave

City Clayton State MO Zip Code 63105-1710

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12740

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms Susan Sarandon

Mailing Address 501 S Beverly Dr

City Beverly Hills State CA Zip Code 90212-4562

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12741

Date of Disbursement

/   /

Amount of Each Disbursement this Period

950.00

**C.**

Full Name (Last, First, Middle Initial)  
Andrew E Stearns

Mailing Address 150 W Flagler St # 2400

City Miami State FL Zip Code 33130-1536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12742

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Richard E Schatz

Mailing Address 150 W Flagler St Ste 2200

City State Zip Code  
Miami FL 33130-1536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12743

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael I Keyes

Mailing Address 150 W Flagler St

City State Zip Code  
Miami FL 33130-1536

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mathew W Buttrick

Mailing Address 180 Buttonwood Dr

City State Zip Code  
Key Biscayne FL 33149-1302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sandor Korein

Mailing Address 128 Fox Creek Rd

City State Zip Code  
Belleville IL 62223-3110

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12746

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**B.**

Full Name (Last, First, Middle Initial)  
Jennifer Buttrick

Mailing Address 180 Buttonwood Dr

City State Zip Code  
Key Biscayne FL 33149-1302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12747

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Allison W Miller

Mailing Address 5505 Oakwood Ln

City State Zip Code  
Coral Gables FL 33156-2109

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12748

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 506 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kevin B Jennings

Mailing Address 11 W 20th St Fl 7

City State Zip Code  
New York NY 10011-3704

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12749

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan Sandelman

Mailing Address 500 Park Ave

City State Zip Code  
New York NY 10022-1606

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12750

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**C.**

Full Name (Last, First, Middle Initial)  
Nazly Mohajer

Mailing Address 945 Front St Ste 209

City State Zip Code  
San Francisco CA 94111-1432

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12751

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey Soukup

Mailing Address 4362 23rd St

City State Zip Code  
San Francisco CA 94114-3112

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12752

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Garry B Whitaker

Mailing Address 640 Nokomis Ct

City State Zip Code  
Winston Salem NC 27106-5712

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12753

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Susan Haugerud

Mailing Address 2117 Upper Saint Dennis Rd

City State Zip Code  
Saint Paul MN 55116-2823

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12754

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) William Edwards	<b>Transaction ID:</b> SB28A-12755 <b>Date of Disbursement</b>																				
Mailing Address 470 University Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Palo Alto State CA Zip Code 94301-1812	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Arthur Keller	<b>Transaction ID:</b> SB28A-12756 <b>Date of Disbursement</b>																				
Mailing Address 3881 Corina Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Palo Alto State CA Zip Code 94303-4507	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mihail Lari	<b>Transaction ID:</b> SB28A-12757 <b>Date of Disbursement</b>																				
Mailing Address 251 Miramonte Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Palo Alto State CA Zip Code 94306-1031	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Sandra Thompson

Mailing Address 580 Manzanita Way

City  
Woodside

State  
CA

Zip Code  
94062-1217

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12758

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Dr Bruce Allen

Mailing Address 2865 Shimmering Bay St

City  
Laughlin

State  
NV

Zip Code  
89029-1252

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Yoko Allen

Mailing Address 2865 Shimmering Bay St

City  
Laughlin

State  
NV

Zip Code  
89029-1252

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 510 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Baron

Mailing Address 2907 Lanford ave

City State Zip Code  
San Jose CA 98125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12761

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Melanie Barnes

Mailing Address 1706 Windsor Rd

City State Zip Code  
Austin TX 78703-3104

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12762

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary R Sharman

Mailing Address 1311 Grizzly Peak Blvd

City State Zip Code  
Berkeley CA 94708-2129

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12763

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 511 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth Emison

Mailing Address PO Box 13

City Alamo State TN Zip Code 38001-0013

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12764

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michele Kirsch

Mailing Address 13930 La Paloma Rd

City Los Altos Hills State CA Zip Code 94022-2628

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12765

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Royce

Mailing Address 52 old orchard lane

City scarsdale State NY Zip Code 10583

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12766

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 512 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Tabetha Hinman

Mailing Address 14 Glen Ridge Ave

City State Zip Code  
Los Gatos CA 95030-5820

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12767

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Ellen Duffy

Mailing Address 2995 Wunneweta Rd

City State Zip Code  
Cutchogue NY 11935-1617

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12768

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

Lisa Noel Kennedy

Mailing Address 3508 N Fremont St

City State Zip Code  
Chicago IL 60657-1707

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 513 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lee F Flaherty

Mailing Address 214 W Erie St

City Chicago State IL Zip Code 60610-3611

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12770

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Allyn M Miller

Mailing Address 214 W Erie St

City Chicago State IL Zip Code 60610-3611

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12771

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David Liddle

Mailing Address 24915 La Loma Ct

City Los Altos Hills State CA Zip Code 94022-4564

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12772

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 514 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Margot J Griswold

Mailing Address 3773 Moore St

City Los Angeles State CA Zip Code 90066-3534

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB28A-12773**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Joan Pirkle Smith

Mailing Address 1146N Central Ave, #521

City Glendale State CA Zip Code 91202

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB28A-12774**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Walter Gilbert

Mailing Address 15 Gray Gdns W

City Cambridge State MA Zip Code 02138-2311

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB28A-12775**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 515 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
William Stacy Miller

Mailing Address PO Box 307

City Raleigh State NC Zip Code 27602-0307

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12776

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kevin A Kennedy

Mailing Address 3508 N Fremont St

City Chicago State IL Zip Code 60657-1707

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12777

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Christopher R Scuderi

Mailing Address 1208 W Huron St

City Chicago State IL Zip Code 60622-5725

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12778

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 516 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President**A.**

Full Name (Last, First, Middle Initial)

Mark T Rumble

Mailing Address 2520 N Burling St Apt 3R

City State Zip Code  
Chicago IL 60614-2533Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12779

Date of Disbursement

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Catherine Tompkison

Mailing Address 2059 Camden Ave Ste 300

City State Zip Code  
San Jose CA 95124-2024Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12780

Date of Disbursement

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Paul L Sestili

Mailing Address 807 Columbus Ave Apt 202

City State Zip Code  
San Francisco CA 94133-5901Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12781

Date of Disbursement

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

5600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 517 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Tracy Sestili

Mailing Address 807 Columbus Ave Apt 202

City State Zip Code  
San Francisco CA 94133-5901

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12782

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Jack Landskroner

Mailing Address 160 Aspenwood Dr

City State Zip Code  
Moreland Hills OH 44022-2302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12783

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**C.**

Full Name (Last, First, Middle Initial)

Rahim Amidi

Mailing Address 323 University Ave

City State Zip Code  
Palo Alto CA 94301-1716

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12784

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michele Costello

Mailing Address 495 Van Buren St

City State Zip Code  
Los Altos CA 94022-1140

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12785

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Costello

Mailing Address 495 Van Buren St

City State Zip Code  
Los Altos CA 94022-1140

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12786

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephanie S Ronco

Mailing Address 1651 Campbell Ave

City State Zip Code  
San Jose CA 95125-5506

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12787

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 519 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Philip Jensen

Mailing Address 3711 La Donna Ave

City Palo Alto State CA Zip Code 94306-3151

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12788

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary Totten

Mailing Address 312 N Euclid Ave

City Oak Park State IL Zip Code 60302-2110

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12789

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary J Vick

Mailing Address 14137 Squirrel Hollow Ln

City Saratoga State CA Zip Code 95070-5417

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12791

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 520 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ozzie Silna

Mailing Address 23301 Palm Canyon Ln

City Malibu State CA Zip Code 90265-4956

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12793

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Joe A. Weeks

Mailing Address 258 Heaton Park Dr

City Decatur State GA Zip Code 30030-1027

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12794

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Katherine Judkins Downs

Mailing Address 738 Cobb St

City Athens State GA Zip Code 30606-2942

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12795

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 521 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Mr Sanford M Cipinko	<b>Transaction ID:</b> SB28A-12796 <b>Date of Disbursement</b>																				
Mailing Address 55 Francisco St Ste 403	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City San Francisco State CA Zip Code 94133-2115	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth Lynch Berman	<b>Transaction ID:</b> SB28A-12797 <b>Date of Disbursement</b>																				
Mailing Address 9229 W Sunset Blvd Ste 607	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Los Angeles State CA Zip Code 90069-3402	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Yasmine Delawari	<b>Transaction ID:</b> SB28A-12798 <b>Date of Disbursement</b>																				
Mailing Address 3950 Royal Oak PI	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Encino State CA Zip Code 91436-3918	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 522 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Anne Berlin

Mailing Address 736 College Ave

City State Zip Code  
Menlo Park CA 94025-5204

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12799

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Eric Scott Montross

Mailing Address 145 Legacy Ter

City State Zip Code  
Chapel Hill NC 27516

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12800

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Manuel Fishman

Mailing Address 255 Crestmont Drive

City State Zip Code  
San Francisco CA 94133

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12801

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Julie Chaiken

Mailing Address 1009 Francisco St

City  
San Francisco

State  
CA

Zip Code  
94109-1126

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12802

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

William Warren

Mailing Address 666 Greenwich St  
#503

City  
New York

State  
NY

Zip Code  
10014-6329

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12803

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Emily Tinsley

Mailing Address 3071 Stony Point Rd

City  
Charlottesville

State  
VA

Zip Code  
22911-6255

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12804

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 524 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jon E Brown

Mailing Address RR 3 Box 622

City Idabel State OK Zip Code 74745-9532

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12805

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Samuel F Baxter

Mailing Address 300 Crescent Ct Ste 1500

City Dallas State TX Zip Code 75201-7856

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12806

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2400.00

**C.**

Full Name (Last, First, Middle Initial)  
Mike McKool, Jr

Mailing Address 300 Crescent Ct

City Dallas State TX Zip Code 75201-1836

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12807

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 525 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Erin Elizabeth Flor

Mailing Address 2117 Upper Saint Dennis Rd

City Saint Paul State MN Zip Code 55116-2823

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12808

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mitchell Haugeruid

Mailing Address 2117 Upper St Dennis Rd

City Saint Paul State MN Zip Code 55116-2823

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12809

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Tamara Colby

Mailing Address 929 Marilyn Dr

City Mountain View State CA Zip Code 94040

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12810

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Yolanda R Cantu Mailing Address 5400 N Cynthia St	<b>Transaction ID:</b> SB28A-12811 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City McAllen State TX Zip Code 78504-2223 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Alonzo Cantu Mailing Address 5400 N Cynthia St City McAllen State TX Zip Code 78504-2223 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12812 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Vance J Owen Mailing Address 9304 Warbler Way City Los Angeles State CA Zip Code 90069-1137 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12813 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Patrick McNicholas

Mailing Address 10866 Wilshire Blvd  
Ste 1400

City Los Angeles State CA Zip Code 90024-4338

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)  
Major A Langer

Mailing Address 6 Possum Ridge Rd

City Rolling Hills State CA Zip Code 90274-5015

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12815

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark P Robinson, Jr

Mailing Address 103 Bayside Pl

City Corona del Mar State CA Zip Code 92625-2856

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12816

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4950.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Suzelle M Smith

Mailing Address 3575 Serra Rd

City Malibu State CA Zip Code 90265-4914

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12817

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Don Howarth

Mailing Address 523 W 6th St Ste 728

City Los Angeles State CA Zip Code 90014-1223

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12818

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Florice Hoffman

Mailing Address 7256 E Crown Pkwy

City Orange State CA Zip Code 92867-6453

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12819

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Neil Yoskin

Mailing Address 7 Brookdale Dr

City State Zip Code  
Trenton NJ 08648-5545

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12820

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1150.00

**B.**

Full Name (Last, First, Middle Initial)  
Nicholo Sartor

Mailing Address 3800 Riders Trl

City State Zip Code  
Hillsborough NC 27278-9352

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12821

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Carolyn L Sartor

Mailing Address 3800 Riders Trl

City State Zip Code  
Hillsborough NC 27278-9352

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 530 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Mark S Pash

Mailing Address 5435 Balboa Blvd Ste 106

City Encino State CA Zip Code 91316-1560

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Chris T Raemisch

Mailing Address 514 Coleman Dr W

City Winter Haven State FL Zip Code 33884-2558

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12824

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

C.

Full Name (Last, First, Middle Initial)  
Mr Jerry G Gottesman

Mailing Address 4801 Evergreen St

City Bellaire State TX Zip Code 77401-5012

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12825

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Arif Balagam Mailing Address 8218 Falling Water Ct	<b>Transaction ID:</b> SB28A-12826 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Sugar Land TX 77478-4751 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Stephen Y Kang Mailing Address 1001 Avenida Pico City State Zip Code San Clemente CA 92673-6957 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12827 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Kristan A Norvig Mailing Address 870 Hamilton Ave City State Zip Code Palo Alto CA 94301-2119 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12828 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>200.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4800.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 532 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Denise S Allen

Mailing Address 880 N Lake Shore Dr  
Apt 15DH

City Chicago State IL Zip Code 60611-5710

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12829

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Karim K Ali

Mailing Address 2 Saint Christopher Ct

City Sugar Land State TX Zip Code 77479-4204

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12830

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary Washburn

Mailing Address 126 Cornelia Ave

City Mill Valley State CA Zip Code 94941-1808

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12831

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 533 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert R Hatten

Mailing Address 12350 Jefferson Ave Ste 300

City Newport News State VA Zip Code 23602-6955

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12832

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Scarborough

Mailing Address 1458 Sugar Creek Blvd

City Sugar Land State TX Zip Code 77478-3930

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12833

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
James Campbell

Mailing Address 5516 Uppingham St

City Chevy Chase State MD Zip Code 20815-5508

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12834

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 534 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Frederick L McGuire

Mailing Address 730 N Post Oak Rd

City Houston State TX Zip Code 77024-3842

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12835

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Frank Farrell

Mailing Address 45 Grove St

City New Canaan State CT Zip Code 06840-5330

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12836

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David D. Dickey

Mailing Address 518 Lakewood Dr

City Brandon State FL Zip Code 33510-4037

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12837

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 535 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Linda Howe

Mailing Address 2460 Spruce View Way

City State Zip Code  
Port Orange FL 32128-3700

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12838

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Gregory Prystock

Mailing Address 13069 Biggin Church Rd S

City State Zip Code  
Jacksonville FL 32224-7687

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12839

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Vincent Powers

Mailing Address 411 S 13th St Ste 300

City State Zip Code  
Lincoln NE 68508-2518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12840

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 536 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) H. Marcia Smolens	<b>Transaction ID:</b> SB28A-12841 <b>Date of Disbursement</b>																				
Mailing Address 350 E Strawberry Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Mill Valley State CA Zip Code 94941-2509	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Musetta	<b>Transaction ID:</b> SB28A-12842 <b>Date of Disbursement</b>																				
Mailing Address 2314 N Riverside Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Tampa State FL Zip Code 33602-1838	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Joan McCaughan	<b>Transaction ID:</b> SB28A-12843 <b>Date of Disbursement</b>																				
Mailing Address 435 Warren Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Key Biscayne State FL Zip Code 33149-1824	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2700.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 537 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ms Marjorie D Main

Mailing Address 3440 S Jefferson St Apt 725

City Falls Church State VA Zip Code 22041-3126

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12844

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

800.00

**B.**

Full Name (Last, First, Middle Initial)  
Iris Graves

Mailing Address 200 Riverfront Dr  
Apt 2511

City Detroit State MI Zip Code 48226-4561

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12845

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)  
Judi Bruegger

Mailing Address 5019 Tanbark Rd

City Dallas State TX Zip Code 75229-4337

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12846

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 538 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Susan Keyes	<b>Transaction ID:</b> SB28A-12847 <b>Date of Disbursement</b>																				
Mailing Address 150 W Flagler St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Miami State FL Zip Code 33130-1536	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Monica Schatz	<b>Transaction ID:</b> SB28A-12848 <b>Date of Disbursement</b>																				
Mailing Address 150 W Flagler St Ste 2200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Miami State FL Zip Code 33130-1536	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Joe D Bolton	<b>Transaction ID:</b> SB28A-12849 <b>Date of Disbursement</b>																				
Mailing Address 5505 Oakwood Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Coral Gables State FL Zip Code 33156-2109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 539 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Debra Spreng Mailing Address 2335 Oakdale Rd	<b>Transaction ID:</b> SB28A-12850 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Hillsborough State CA Zip Code 94010-6140 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Davis Mailing Address 721 Rosemount Rd City Oakland State CA Zip Code 94610 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12851 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>52.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Gillian L Flack Mailing Address 57 Woodcrest Dr City Bethalto State IL Zip Code 62010-2194 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12852 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1100.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3452.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael Nooney

Mailing Address 229 Brannan Street Unit 14E

City State Zip Code  
San Francisco CA 94107

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12853

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda Jacobs

Mailing Address 45 E 9th St Apt 95

City State Zip Code  
New York NY 10003-6310

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12854

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jonathan Kaplan

Mailing Address 4323 Ben Ave

City State Zip Code  
Studio City CA 91604-1704

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12855

Date of Disbursement

/   /

Amount of Each Disbursement this Period

950.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Juanita Young

Mailing Address 7007 45th Ave N

City State Zip Code  
Crystal MN 55428-5019

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12856

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Weaster

Mailing Address 15831 Fleetwood Oaks Dr

City State Zip Code  
Houston TX 77079-2404

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12857

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David Domansky

Mailing Address 23289 Aldo Rd NW

City State Zip Code  
Poulsbo WA 98370-9609

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12858

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
William D Lister

Mailing Address 210 Howes Dr

City State Zip Code  
Los Gatos CA 95032-4019

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12859

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

1650.00

B.

Full Name (Last, First, Middle Initial)  
Jay Tenenbaum

Mailing Address 25 Alhambra Ct

City State Zip Code  
Portola Valley CA 94028-7722

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12860

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Amy L Fikes

Mailing Address 4025 Beverly Dr

City State Zip Code  
Dallas TX 75205-2849

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12861

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 543 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Scott Murray

Mailing Address 251 Miramonte Ave

City Palo Alto State CA Zip Code 94306-1031

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12862

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Ricardo Echeverria

Mailing Address 836 Manchester Ct

City Claremont State CA Zip Code 91711-2996

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12863

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)

Terri L Bentley

Mailing Address 4730 E Kelsea PI

City Tucson State AZ Zip Code 85718-5460

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12864

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1150.00

SUBTOTAL of Disbursements This Page (optional) .....

5750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

W Scott Montross

Mailing Address 9400 Mud Creek Rd

City Indianapolis State IN Zip Code 46256-9318

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12865

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Philip Albert

Mailing Address 160 Monaco Dr

City Redwood City State CA Zip Code 94065-2860

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12866

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2250.00

**C.**

Full Name (Last, First, Middle Initial)

Spiro Macris

Mailing Address 914 S Lumina Ave

City Wrightsville Beach State NC Zip Code 28480-3122

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12867

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Marcus A Mancini

Mailing Address 25765 Laurel Oak Ct

City Valencia State CA Zip Code 91381-0740

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12868

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Kathryn L Blaylock

Mailing Address 2344 Stephanie Ln

City Clayton State NC Zip Code 27520-8445

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Karole Jensen

Mailing Address 3740 Indigo Run

City Conway State SC Zip Code 29526-7822

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12870

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Matthew McNicholas

Mailing Address 10866 Wilshire Blvd  
Ste 1400

City Los Angeles State CA Zip Code 90024-4338

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12871

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)  
Dr Michael Y Lee

Mailing Address PO Box 4614

City Chapel Hill State NC Zip Code 27515-4614

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12872

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)  
Amber Mostyn

Mailing Address 200 Westcott St

City Houston State TX Zip Code 77007-7004

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12873

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 547 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Peter Norvig

Mailing Address 870 Hamilton Ave

City Palo Alto State CA Zip Code 94301-2119

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Leon Sokol

Mailing Address 433 Hackensack Ave

City Hackensack State NJ Zip Code 07601-6319

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12875

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1150.00

**C.**

Full Name (Last, First, Middle Initial)  
Daniel Zohar

Mailing Address 4941 Arcola Ave

City North Hollywood State CA Zip Code 91601-4811

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 548 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Franklin Henson

Mailing Address 34 Peachtree Cir NE

City Atlanta State GA Zip Code 30309-3519

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12877

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard A Bell

Mailing Address PO Box 1529

City Norman State OK Zip Code 73070-1529

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12878

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas L Mason

Mailing Address 130 Van Dr

City Kathleen State GA Zip Code 31047-2202

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12879

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 549 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John F Newman

Mailing Address 2832 Bobwhite Trl

City Edmond State OK Zip Code 73003-2304

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David M Garrett

Mailing Address 111 W 5th St  
Ste 800

City Tulsa State OK Zip Code 74103-4262

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12881

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)  
Justin Meek

Mailing Address 3205 Crown Feathers Dr

City Edmond State OK Zip Code 73013-7419

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12882

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Diane M Petitpren

Mailing Address 3747 Riverview Ter N

City East China State MI Zip Code 48054-2213

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12883

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Glenn A Bergenfield

Mailing Address 3440 Old Windy Bush Rd

City New Hope State PA Zip Code 18938-1160

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12884

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Arlene Tenenbaum

Mailing Address 25 Alhambra Ct

City Portola Valley State CA Zip Code 94028-7722

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12885

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Laurie Cohn

Mailing Address 4227 BELLAIRE AVE

City State Zip Code  
STUDIO CITY CA 91604-1525

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12886

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Charlitta P Winston

Mailing Address 7453 Quincy Ct

City State Zip Code  
Indianapolis IN 46254-9673

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12887

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Khalid Husain

Mailing Address 24501 Fm 2100 Rd

City State Zip Code  
Huffman TX 77336-4341

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12888

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 552 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Ms Betty T Yee

Mailing Address 1425 Taraval St

City  
San Francisco

State  
CA

Zip Code  
94116-2347

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12889

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Cassandra F Gaenger

Mailing Address 219 Forbes Ave

City  
San Rafael

State  
CA

Zip Code  
94901-1744

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12890

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Lawrence A Anderson

Mailing Address PO Box 2608

City  
Great Falls

State  
MT

Zip Code  
59403-2608

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12891

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 553 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert K Utley, III

Mailing Address 2828 Hood St Apt 403

City State Zip Code  
Dallas TX 75219-7805

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12892

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Vince Casiero

Mailing Address 14 Ridgedale Ave  
Ste 103

City State Zip Code  
Cedar Knolls NJ 07927-1106

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12893

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)  
Brian D Chase

Mailing Address 509 Orchid Ave

City State Zip Code  
Corona del Mar CA 92625-2424

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12894

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 554 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael Galler

Mailing Address 5266 Hollister Ave Ste 120

City Santa Barbara State CA Zip Code 93111-3038

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12895

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Brian Hinman

Mailing Address 14 Glen Ridge Ave

City Los Gatos State CA Zip Code 95030-5820

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12896

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard D Meadow

Mailing Address 85 E End Ave

City New York State NY Zip Code 10028-8020

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12897

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 555 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Stephen F Malouf

**Transaction ID:** SB28A-12898

Date of Disbursement

/   /

Mailing Address 3811 Turtle Creek Blvd  
Ste 1600

City Dallas State TX Zip Code 75219-4558

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Robin Wright Penn

**Transaction ID:** SB28A-12899

Date of Disbursement

/   /

Mailing Address 2049 Century Park E  
Suite 2500

City Los Angeles State CA Zip Code 90067-3101

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Sean Penn

**Transaction ID:** SB28A-12900

Date of Disbursement

/   /

Mailing Address 2049 Century Park E  
Suite 2500

City Los Angeles State CA Zip Code 90067-3101

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 556 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Gloria Page

Mailing Address 1056 Green Acres Rd  
#102-343

City Eugene State OR Zip Code 97408-1505

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

355.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Ramsey

Mailing Address 4880 Christina Ln

City Beaumont State TX Zip Code 77706-7703

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12902

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Matthew Meiners

Mailing Address 17320 High Rd

City Sonoma State CA Zip Code 95476-4734

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12903

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3655.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 557 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James Stanley

Mailing Address 2200 Hemphill St

City Fort Worth State TX Zip Code 76110-2014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12904

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Christi Stanley

Mailing Address 2200 Hemphill St

City Fort Worth State TX Zip Code 76110-2014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12905

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen Rosin

Mailing Address 1880 Century Park E Fl 16

City Los Angeles State CA Zip Code 90067-1600

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12906

Date of Disbursement

/   /

Amount of Each Disbursement this Period

48.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4648.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 558 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Claudia De La Rosa

Mailing Address 14967 Dickens St  
Apt B

City Sherman Oaks State CA Zip Code 91403-3494

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12908

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

James Hedges

Mailing Address 1500 Marina Bay Dr Ste 1561  
Bldg 56-A

City Clear Lake Shores State TX Zip Code 77565-2263

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12909

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Giuseppi Forgione

Mailing Address PO Box 227

City New Vernon State NJ Zip Code 07976-0227

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12910

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 559 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ronald Krist

Mailing Address 2600 S Shore Blvd Ste 120

City State Zip Code  
League City TX 77573-3367

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12911

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Randall Gressett

Mailing Address 106 Fairway Valley Ct

City State Zip Code  
Cary NC 27513-5678

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12912

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Wendy Gressett

Mailing Address 106 Fairway Valley Ct

City State Zip Code  
Cary NC 27513-5678

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-12913

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 560 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John T Benson

Mailing Address 1820 Avenue O 1/2 Apt 5

City Galveston State TX Zip Code 77550-8078

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12914

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Patricia Buzbee

Mailing Address 302 County Road 2127

City Atlanta State TX Zip Code 75551-5100

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12915

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen D Holmes

Mailing Address 2216 Jernigan Frd

City Dickinson State TX Zip Code 77539-5079

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12916

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



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	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Christopher Johns

Mailing Address  
303 Asbury St

City  
Houston

State  
TX

Zip Code  
77007-7136

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Category/  
Type

Transaction ID: SB28A-12917

Date of Disbursement  

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03

24

2008

Amount of Each Disbursement this Period  
2300.00

B.

Full Name (Last, First, Middle Initial)  
Nicholas G Simon

Mailing Address  
108 Cowards Creek

City  
Friendswood

State  
TX

Zip Code  
77546

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Category/  
Type

Transaction ID: SB28A-12918

Date of Disbursement  

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Y

Y

Y

03

24

2008

Amount of Each Disbursement this Period  
2300.00

C.

Full Name (Last, First, Middle Initial)  
Peter T Taaffe

Mailing Address  
3703 Moon Lark Ct

City  
Austin

State  
TX

Zip Code  
78746-1422

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Category/  
Type

Transaction ID: SB28A-12919

Date of Disbursement  

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Y

Y

Y

Y

03

24

2008

Amount of Each Disbursement this Period  
2200.00

SUBTOTAL of Disbursements This Page (optional) ▶

6800.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 562 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Aaron I Vela

Mailing Address 514 Pacific Ave

City Edinburg State TX Zip Code 78539-7362

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12920

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Lorella C Vela

Mailing Address 514 Pacific Ave

City Edinburg State TX Zip Code 78539-7362

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12921

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Kim A Sarkisian

Mailing Address 798 Crandon Blvd Apt 57

City Key Biscayne State FL Zip Code 33149-2523

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12922

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 563 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Susan Menendez

Mailing Address IR

City State Zip Code  
Ir IR NULL

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12923

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Julian Ybarra, Jr

Mailing Address 3220 Dutchess St

City State Zip Code  
Edinburg TX 78539-6442

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12924

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Deborah W Lowry

Mailing Address 1364 Fallsbrook Way NW

City State Zip Code  
Acworth GA 30101-7819

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12926

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 564 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Janet L Sinegal

Mailing Address 4245 Hunts Point Rd

City  
Hunts Point

State  
WA

Zip Code  
98004-1107

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12927

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Christa R Haggai

Mailing Address 8726 S Sepulveda Blvd  
# 1811

City  
Los Angeles

State  
CA

Zip Code  
90045-4014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12928

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy P Boyle

Mailing Address PO Box 8307

City  
Portland

State  
OR

Zip Code  
97207-8307

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12929

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 565 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Scott Seligman

Mailing Address 1 Towne Sq  
Ste 1913

City Southfield State MI Zip Code 48076-3733

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12930

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Harriet Berger

Mailing Address 4101 Timber Ln

City Philadelphia State PA Zip Code 19129-5525

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12932

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael J Kator

Mailing Address 10709 Alloway Dr

City Potomac State MD Zip Code 20854-1602

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12933

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 566 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Christian Searcy

Mailing Address 2139 Palm Beach Lakes Blvd

City State Zip Code  
West Palm Beach FL 33409-6601

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12934

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
John Langley

Mailing Address 1111 Broadway

City State Zip Code  
Santa Monica CA 90401-3007

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12935

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jennifer Kaplan

Mailing Address 302 Kemp Rd W

City State Zip Code  
Greensboro NC 27410-6043

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12936

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 567 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Maria Ibarra

Mailing Address 1303 Nolana

City Alamo State TX Zip Code 78516-7252

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12937

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Leonel Lopez

Mailing Address 401 Anaqua Dr

City Rio Grande City State TX Zip Code 78582-6704

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12938

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Angela Pechero

Mailing Address 2312 la conda

City edinsting State TX Zip Code 28539

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12939

Date of Disbursement

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Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 568 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Diamantina Pena	<b>Transaction ID:</b> SB28A-12940 <b>Date of Disbursement</b>																				
Mailing Address 905 S Huisache Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Pharr State TX Zip Code 78577-6145	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Victor Hugo Sanchez-Maluly	<b>Transaction ID:</b> SB28A-12941 <b>Date of Disbursement</b>																				
Mailing Address PO Box 1869	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City McAllen State TX Zip Code 78505-1869	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Angela Norwood Moody	<b>Transaction ID:</b> SB28A-12942 <b>Date of Disbursement</b>																				
Mailing Address 801 W 4th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Little Rock State AR Zip Code 72201-2107	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 569 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Edward O Moody

Mailing Address 801 W 4th St

City Little Rock State AR Zip Code 72201-2107

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12943

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Reed Edward Moody

Mailing Address 801 W 4th St

City Little Rock State AR Zip Code 72201-2107

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12944

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Rina R Gonzalez

Mailing Address 3511 Plazas del Lago Dr

City Edinburg State TX Zip Code 78539-7700

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12945

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 570 / 774

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☒ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Frederick Kuykendall

Mailing Address 1340 Sledge Dr

City State Zip Code  
Mobile AL 36606-3021

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12946

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Eldia Cantu

Mailing Address PO Box 2673

City State Zip Code  
McAllen TX 78502-2673

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12947

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
S David Deanda, Jr

Mailing Address 2408 Dorado Dr

City State Zip Code  
Mission TX 78573-8450

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12948

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 571 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Eugenio G Galindo Mailing Address 2601 Solera	<b>Transaction ID:</b> SB28A-12949 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
City Mission State TX Zip Code 78572-7583 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																				
2300.00																						
<b>B.</b> Full Name (Last, First, Middle Initial) Jose R Garza Mailing Address 5404 N 1st St City McAllen State TX Zip Code 78504-2211 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12950 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2300.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2300.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
2300.00																						
<b>C.</b> Full Name (Last, First, Middle Initial) Jennifer Stanich Banmiller Mailing Address 4155 Blackhawk Plaza Cir Ste 110 City Danville State CA Zip Code 94506-4613 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-12951 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
200.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 572 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Vincent J Carter

Mailing Address 652 Orange Grove Ave

City S Pasadena State CA Zip Code 91030-2353

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12952

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
William S Pidcock

Mailing Address 5200 Everhard Rd NW  
Apt 1

City Canton State OH Zip Code 44718-2354

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12953

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Philip J Fulton

Mailing Address 2734 Lymington Rd

City Columbus State OH Zip Code 43220-4226

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12954

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 573 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

G J Reyna

Mailing Address 1200 E Jasmine Ave

City  
McAllen

State  
TX

Zip Code  
78501-5707

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12955

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy D Croxall

Mailing Address 11266 Taylor Draper Ln  
Apt 1513

City  
Austin

State  
TX

Zip Code  
78759-3969

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12956

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Warren Adelson

Mailing Address 842 Sleepy Hollow Rd

City  
Scarborough

State  
NY

Zip Code  
10510-2518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12957

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 574 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Francisco I Bracamontes

Mailing Address 2005 Cimarron Ct

City Mission State TX Zip Code 78572-7432

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12958

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Christopher J Bruno

Mailing Address 170 Audubon Blvd

City New Orleans State LA Zip Code 70118-5541

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12959

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1800.00

**C.**

Full Name (Last, First, Middle Initial)  
Joseph M Bruno

Mailing Address 855 Baronne St

City New Orleans State LA Zip Code 70113-1102

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12960

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 575 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Morton H Katz

Mailing Address 820 Okeefe Ave

City State Zip Code  
New Orleans LA 70113-1125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12961

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jay R Halfon

Mailing Address 215 W 88th St Apt 5E

City State Zip Code  
New York NY 10024-2354

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12962

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Vincent F Honrubia

Mailing Address 204 Rio Grande Dr

City State Zip Code  
Mission TX 78572-8559

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12963

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 576 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John C Graham

Mailing Address 10345 Lady Candice Ln

City State Zip Code  
Charlotte NC 28270-0294

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12964

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Srinija Srinivasan

Mailing Address 220 Miramonte Ave

City State Zip Code  
Palo Alto CA 94306-1030

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12965

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Raymond P Boucher

Mailing Address 40627 Champion Way

City State Zip Code  
Palmdale CA 93551-5650

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12966

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 577 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Earl C Sturm

Mailing Address 1686 Deerhaven Trl

City State Zip Code  
Dacula GA 30019-3283

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12967

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms Anne M Valentine

Mailing Address 1469 Roxbury Rd

City State Zip Code  
Columbus OH 43212-3211

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12968

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Marilou H Mcfarlane

Mailing Address 130 Buena Vista Ave

City State Zip Code  
Mill Valley CA 94941-1234

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Janet Boyle

Mailing Address 1601 E Lake Dr

City State Zip Code  
Ft Lauderdale FL 33316-3207

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12970

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Louis M Solerno

Mailing Address 8 Horizon Farms Dr

City State Zip Code  
Warwick NY 10990-2259

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12971

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Diane Solerno

Mailing Address 8 Horizon Farms Dr

City State Zip Code  
Warwick NY 10990-2259

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12972

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 579 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Hannaford

Mailing Address 75 Central St

City State Zip Code  
South Weymouth MA 02190-2301

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12973

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Katherine S Lester

Mailing Address 249 W 76th St Apt 4B

City State Zip Code  
New York NY 10023-8251

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12974

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Pamela Anagnos Liapakis

Mailing Address 515 E 79th St Fl 14

City State Zip Code  
New York NY 10075-0705

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12975

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth A Stewart

Mailing Address 190 Baldwin Rd

City State Zip Code  
Bedford Corners NY 10549-4817

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12976

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Patricia Agnew

Mailing Address 781 Lower Sweet Grass Rd

City State Zip Code  
Big Timber MT 59011-7779

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12977

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Frank Todaro

Mailing Address 144 W 18th St Apt 2E

City State Zip Code  
New York NY 10011-5466

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12978

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 581 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Carmen Bossi

Mailing Address 32 Kinloch Dr

City Stratham State NH Zip Code 03885-2138

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12979

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Beth Isola Lepping

Mailing Address 1634 Sherman Ave

City Madison State WI Zip Code 53704-5931

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12980

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2280.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael M Delijani

Mailing Address 9735 Wilshire Blvd  
Ste 122

City Beverly Hills State CA Zip Code 90212-2101

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12981

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4780.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 582 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Paul Mcandrew

Mailing Address 2771 Oakdale Blvd Ste 6

City State Zip Code  
Coralville IA 52241-9746

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12982

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

**B.**

Full Name (Last, First, Middle Initial)

Wise Young

Mailing Address 5 Dennis St Apt 210

City State Zip Code  
New Brunswick NJ 08901-1293

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12983

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Kent Spence

Mailing Address po box 1489

City State Zip Code  
wilson WY 83014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12984

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 583 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Kirsten M Meadow

Mailing Address 85 E End Ave Apt 8D

City State Zip Code  
New York NY 10028-8021

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12985

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Stacey Mills Heins

Mailing Address 2730 Woolsey Ln

City State Zip Code  
Wayzata MN 55391-2751

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12986

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Jonas A Nance

Mailing Address 150 Poinciana Dr

City State Zip Code  
Indian Harbour Bea FL 32937-4437

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12987

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 584 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Herman Gaskins, III

Mailing Address 115 Riverview Dr

City Washington State NC Zip Code 27889-9763

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12988

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**B.**

Full Name (Last, First, Middle Initial)  
Diane S. McGrath

Mailing Address 231 Nubble Rd

City York State ME Zip Code 03909-6868

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12989

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gil Michaels

Mailing Address PO Box 5312

City Beverly Hills State CA Zip Code 90209-5312

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12990

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 585 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Charles R. Bendit

Mailing Address 40 W 74th St

City State Zip Code  
New York NY 10023-2450

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12991

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Chris McGrath

Mailing Address 51 Perry St # 2

City State Zip Code  
Somerville MA 02143-3818

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12992

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Warfield

Mailing Address 19171 Warrington Dr

City State Zip Code  
Detroit MI 48221-1820

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12993

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 586 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Carolyn Clark

Mailing Address 4415 Rolling Pine Dr

City State Zip Code  
W Bloomfield MI 48323-1445

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12994

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda Moscone

Mailing Address 35 Laverne Ave

City State Zip Code  
Mill Valley CA 94941-3426

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12995

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**C.**

Full Name (Last, First, Middle Initial)  
Anastasia Mann

Mailing Address 26 Lilac Ln

City State Zip Code  
Princeton NJ 08540-3022

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12996

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 587 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas F Taft, Jr

Mailing Address PO Box 566

City Greenville State NC Zip Code 27835-0566

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12997

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Walton Waterbury

Mailing Address 324 N Ridgewood Rd

City South Orange State NJ Zip Code 07079-1622

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12998

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Debra Yap

Mailing Address 954 Lake Wyman Rd

City Boca Raton State FL Zip Code 33431-7807

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-12999

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 588 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Bobby Buzbee

Mailing Address 302 County Road 2127

City Atlanta State TX Zip Code 75551-5100

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13000

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Jan Adelson

Mailing Address 842 Sleepy Hollow Rd

City Scarborough State NY Zip Code 10510-2518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13001

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Vincent Stanich

Mailing Address 4155 Blackhawk Plaza Cir  
Ste 110

City Danville State CA Zip Code 94506-4613

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13002

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 589 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth Taaffe Mailing Address 3703 Moon Lark Ct	<b>Transaction ID:</b> SB28A-13003 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Austin State TX Zip Code 78746-1422 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2200.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Carole Shorenstein Hays Mailing Address 260 Sea Cliff Ave City San Francisco State CA Zip Code 94121-1028 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13004 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Dr Jeffrey P Hays Mailing Address 260 Sea Cliff Ave City San Francisco State CA Zip Code 94121-1028 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13005 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6800.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 590 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin Bacon	<b>Transaction ID:</b> SB28A-13006 <b>Date of Disbursement</b>																				
Mailing Address      Information Requested	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City      State      Zip Code Freehold      NJ      7728	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Kerrigan	<b>Transaction ID:</b> SB28A-13007 <b>Date of Disbursement</b>																				
Mailing Address      400 east government street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City      State      Zip Code pensacola      FL      32502	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Marsha Garces Williams	<b>Transaction ID:</b> SB28A-13008 <b>Date of Disbursement</b>																				
Mailing Address      1775 Broadway Ste 708	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City      State      Zip Code New York      NY      10019-1903	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 591 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Antonina Armato

Mailing Address 2505 Crest Dr

City State Zip Code  
Manhattan Beach CA 90266-2135

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13009

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Nicola Miner

Mailing Address 2835 Broadway St

City State Zip Code  
San Francisco CA 94115-1060

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Mailer Anderson

Mailing Address 2835 Broadway St

City State Zip Code  
San Francisco CA 94115-1060

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13011

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

2300.00

2300.00

2300.00

FE1AN060.PDF



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 593 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mary Gross

Mailing Address 528 Kimball St NE

City State Zip Code  
Fridley MN 55432-1641

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13015

Date of Disbursement

/   /

Amount of Each Disbursement this Period

850.00

**B.**

Full Name (Last, First, Middle Initial)

Robin Psaros

Mailing Address 6 Azalea Cir

City State Zip Code  
Purchase NY 10577-1131

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13017

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Psaros

Mailing Address 6 Azalea Cir

City State Zip Code  
Purchase NY 10577-1131

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13018

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 594 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Aaron C Young Mailing Address 7007 45th Ave N	<b>Transaction ID:</b> SB28A-13019 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	3		2	4		2	0	0	8																						
City Crystal State MN Zip Code 55428-5019 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																													
2300.00																															
<b>B.</b> Full Name (Last, First, Middle Initial) Edward S Adams Mailing Address 2010 W 49th St City Minneapolis State MN Zip Code 55419-5228 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-13020 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2300.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	3		2	4		2	0	0	8																						
2300.00																															
<b>C.</b> Full Name (Last, First, Middle Initial) Raquel V Palmer Mailing Address 151 W 17th St Apt 11G City New York State NY Zip Code 10011-5457 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-13021 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2300.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	3		2	4		2	0	0	8																						
2300.00																															

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 595 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Jeremy Palmer

Mailing Address 151 W 17th St Apt 11G

City State Zip Code  
New York NY 10011-5457

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13022

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Robert Mcchesney

Mailing Address 1103 S. Douglas

City State Zip Code  
Urbana IL 61801

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13023

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)

Patricia J Cagle

Mailing Address 2142 Overland Ave

City State Zip Code  
Los Angeles CA 90025-6309

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13024

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

6900.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 596 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Tom Driscoll	<b>Transaction ID:</b> SB28A-13025 <b>Date of Disbursement</b>																				
Mailing Address 1620 Lombardi Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Mount Shasta State CA Zip Code 96067	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Lauren Coodley	<b>Transaction ID:</b> SB28A-13026 <b>Date of Disbursement</b>																				
Mailing Address 30 Prince Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Napa State CA Zip Code 94558-5532	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) William Hunt	<b>Transaction ID:</b> SB28A-13027 <b>Date of Disbursement</b>																				
Mailing Address 84 Judson St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Canton State NY Zip Code 13617-1151	<b>Amount of Each Disbursement this Period</b>																				
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1708.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6308.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 597 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Linda Rodd

Mailing Address 8 vine street

City State Zip Code  
bronxville NY 10708

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13028

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Dave Kieffer

Mailing Address 9737 Conestoga Way

City State Zip Code  
Potomac MD 20854-4711

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13029

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Susan Macfadden

Mailing Address 6244 26th Ave NE

City State Zip Code  
Seattle WA 98115

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13030

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 598 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Margaret Cotton	<b>Transaction ID:</b> SB28A-13031 <b>Date of Disbursement</b>																				
Mailing Address 12736 Rhoden Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Lowell State AR Zip Code 72745	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Lee Ann Daly	<b>Transaction ID:</b> SB28A-13032 <b>Date of Disbursement</b>																				
Mailing Address 144 W 18th St Apt 2E	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10011-5466	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Dolores Perera	<b>Transaction ID:</b> SB28A-13033 <b>Date of Disbursement</b>																				
Mailing Address 1016 Alhambra Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Coral Gables State FL Zip Code 33134	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">877.41</td> </tr> </table>	877.41																			
877.41																					
Candidate Name	Category/ Type																				
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**SUBTOTAL** of Disbursements This Page (optional) .....

**3377.41**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 599 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Benjamin R Jacobs

Mailing Address 6619 Elgin Ln

City Bethesda State MD Zip Code 20817-5443

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13034

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Alison Bernstein

Mailing Address 30 Cross Hwy

City Westport State CT Zip Code 06880-2141

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13035

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Albert H Kramer

Mailing Address 1111 23rd St NW Apt PH1B

City Washington State DC Zip Code 20037-3327

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13036

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 600 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ruth Jaeger

Mailing Address 1825 I St NW

City Washington State DC Zip Code 20006-5403

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13037

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Brent Mills

Mailing Address 800 Mount Vernon Cir

City Chattanooga State TN Zip Code 37405-2945

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13038

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gail Jacobs

Mailing Address 6619 Elgin Ln

City Bethesda State MD Zip Code 20817-5443

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13039

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 601 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Kerry Bruno	<b>Transaction ID:</b> SB28A-13040 <b>Date of Disbursement</b>																				
Mailing Address 170 Audubon Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New Orleans State LA Zip Code 70118-5541	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">1300.00</td> </tr> </table>	1300.00																			
1300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) John Keehler	<b>Transaction ID:</b> SB28A-13041 <b>Date of Disbursement</b>																				
Mailing Address 528 Kimball St NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
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0	3		2	4		2	0	0	8												
City Fridley State MN Zip Code 55432-1641	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">850.00</td> </tr> </table>	850.00																			
850.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Michael E McGrath	<b>Transaction ID:</b> SB28A-13042 <b>Date of Disbursement</b>																				
Mailing Address 231 Nubble Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
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0	3		2	4		2	0	0	8												
City York State ME Zip Code 03909-6868	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4450.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 602 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Karyn K Bendit

Mailing Address 40 W 74th St

City State Zip Code  
New York NY 10023-2450

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13043

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
John Mcallen Scanlan

Mailing Address 789 Stagecoach Cir

City State Zip Code  
Santa Fe NM 87501-1145

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13044

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Tim Robbins

Mailing Address 11400 W Olympic Blvd  
Ste 350

City State Zip Code  
Los Angeles CA 90064-1540

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13045

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 603 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bette Midler</p> <p>Mailing Address 1222 16th Ave S 3RD FLR</p> <p>City Nashville State TN Zip Code 37212-2926</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13046</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) David V Dorris</p> <p>Mailing Address 207 W Jefferson St Ste 601</p> <p>City Bloomington State IL Zip Code 61701-3961</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13047</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Stephanie Low</p> <p>Mailing Address 1215 5th Ave.</p> <p>City New York State NY Zip Code 10029</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13694</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 604 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael Thornton

Mailing Address 26 Eaton Court

City Wellesly State MA Zip Code 02481

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13695

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2080.00

**B.**

Full Name (Last, First, Middle Initial)  
J. Shale Martin

Mailing Address 2200 Guy Road

City Clayton State NC Zip Code 27520

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13696

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Herbert Abrams

Mailing Address 620 Sand Hill road, ap't 109g

City palo alto State CA Zip Code 94304

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13104

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4380.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

2300.00

2300.00

2300.00

FEC Schedule B (Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 606 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Courtney M Baron

Mailing Address 39 Plaza St W Apt 3A

City State Zip Code  
Brooklyn NY 11217-3949

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13108

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

David Beecher

Mailing Address 337 Robin Hill St

City State Zip Code  
Marlborough MA 01752-8022

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13110

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)

Paul Bennett

Mailing Address 595 Market St  
Ste 2300

City State Zip Code  
San Francisco CA 94105-2835

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13111

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 607 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Michael Berman

Mailing Address 1067 Sasco Hill Rd

City Fairfield State CT Zip Code 06824-6392

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13112

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Armyan Bernstein

Mailing Address 1640 S Sepulveda Blvd Ste 515

City Los Angeles State CA Zip Code 90025-7538

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13113

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Don Beskind

Mailing Address 1 Learned PI

City Durham State NC Zip Code 27705-5714

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13114

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 608 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Richard Bieder

Mailing Address 19 Millertown Rd

City Bedford State NY Zip Code 10506-1304

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13115

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lou Thompson Black

Mailing Address 2309 Sunset Blvd

City Houston State TX Zip Code 77005-1531

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13116

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Shoshana Bookson

Mailing Address 150 Broadway Fl 14

City New York State NY Zip Code 10038-4369

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13118

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 609 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President**A.**Full Name (Last, First, Middle Initial)  
Stephen R Bough

Mailing Address 917 W 43rd St

City State Zip Code  
Kansas City MO 64111-3133Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13119

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Amount of Each Disbursement this Period

100.00

**B.**Full Name (Last, First, Middle Initial)  
Stanley E Bozarth

Mailing Address 1310 Legacy Ln

City State Zip Code  
Wilmington NC 28411-9276Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13120

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Amount of Each Disbursement this Period

2100.00

**C.**Full Name (Last, First, Middle Initial)  
Stanley E Bozarth

Mailing Address 1310 Legacy Ln

City State Zip Code  
Wilmington NC 28411-9276Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13121

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	8

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) .....

2400.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 610 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Breit

Mailing Address 999 Waterside Dr

City Norfolk State VA Zip Code 23510-3300

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13122

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Peter Briger

Mailing Address 101 Central Park West #14F

City New York State NY Zip Code 10023

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13124

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Melissa Brown

Mailing Address 2315 Capitol Ave

City Sacramento State CA Zip Code 95816-5812

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13125

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 611 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Jeff S Burum Mailing Address 5033 Earl Ct	<b>Transaction ID:</b> SB28A-13126 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Alta Loma State CA Zip Code 91701-1410 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Phyllis C Cafaro Mailing Address 1374 Warner Rd City Hubbard State OH Zip Code 44425-2755 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13128 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) W Thomas Comerford, Jr Mailing Address 3500 Stonegate Ct City Winston Salem State NC Zip Code 27104-1824 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13130 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 612 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lou Anne Crumpler

Mailing Address 2315 Lake Dr

City Raleigh State NC Zip Code 27609-7667

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13131

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Cucchiara

Mailing Address 81 Meadow Ridge Ln

City Chapel Hill State NC Zip Code 27517-8810

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13132

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas F Curnin

Mailing Address 40 Ocean Ave

City Larchmont State NY Zip Code 10538-4236

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13133

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 613 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Carey Dean Debnam

Mailing Address 1410 Park Dr

City Raleigh State NC Zip Code 27605-1728

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13134

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Anne M Dellinger

Mailing Address 632 Dorothy Dr

City Charlotte State NC Zip Code 28203-5613

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13135

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Dean Devlin

Mailing Address 11601 Wilshire Blvd  
Ste 2150

City Los Angeles State CA Zip Code 90025-1757

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13136

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 614 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Donna K Douglas

Mailing Address 18 Windsong Dr

City State Zip Code  
Fairview NC 28730-9700

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13137

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Bertis Downs, IV

Mailing Address 738 Cobb St

City State Zip Code  
Athens GA 30606-2942

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13138

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Thiele Dunaway

Mailing Address 7254 Cutting Blvd

City State Zip Code  
El Cerrito CA 94530-1826

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13139

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 24 / 2008

Amount of Each Disbursement this Period

15.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4615.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 615 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jay W Eisenhofer

Mailing Address 1201 N Market St

City State Zip Code  
Wilmington DE 19801-1147

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13140

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Ferguson

Mailing Address 1122 River Oaks Ln

City State Zip Code  
Charlotte NC 28226-6840

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13141

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michelle Fotheringham

Mailing Address 2286 Carriage Lane #83

City State Zip Code  
Salt Lake City UT 84117

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13142

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4660.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 616 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Anne O Fountain

Mailing Address 14009 Clayton Rd

City State Zip Code  
San Jose CA 95127-5202

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13143

Date of Disbursement

/   /

Amount of Each Disbursement this Period

113.53

**B.**

Full Name (Last, First, Middle Initial)

Thomas Drake Garlitz

Mailing Address 4434 Mullens Ford Rd

City State Zip Code  
Charlotte NC 28226-5509

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13144

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Denise Girardi

Mailing Address 5 Burrell Ln

City State Zip Code  
Rancho Palos Verde CA 90275-5075

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13145

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4713.53

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 617 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John Girardi

Mailing Address 5 Burrell Ln

City Rancho Palos Verde State CA Zip Code 90275-5075

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13146

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mitchell D Gravo

Mailing Address 1607 W 14th Ave

City Anchorage State AK Zip Code 99501-4931

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13148

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul Grieco

Mailing Address 1360 W 9th St Ste 200

City Cleveland State OH Zip Code 44113-1254

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13149

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 618 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Lois Ani Haigazian

Mailing Address 2121 Carnegie Ln

City Redondo Beach State CA Zip Code 90278-3632

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13151

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Lois Ani Haigazian

Mailing Address 2121 Carnegie Ln

City Redondo Beach State CA Zip Code 90278-3632

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13152

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.00

**C.**

Full Name (Last, First, Middle Initial)

Lee Hamilton

Mailing Address PO Box 240609

City Montgomery State AL Zip Code 36124-0609

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13153

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2808.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 619 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michelle Hamilton

Mailing Address PO Box 240609

City Montgomery State AL Zip Code 36124-0609

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13154

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Carol C Hamrick

Mailing Address 537 Colville Rd

City Charlotte State NC Zip Code 28207-2305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13155

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Seth A Harris

Mailing Address 233 Broadway Rm 900

City New York State NY Zip Code 10279-0999

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13156

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 620 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Renee Haugerud	<b>Transaction ID:</b> SB28A-13157 <b>Date of Disbursement</b>																				
Mailing Address 25887 County 12	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Preston State MN Zip Code 55965-1520	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Sharon Henley	<b>Transaction ID:</b> SB28A-13158 <b>Date of Disbursement</b>																				
Mailing Address 21650 Oxnard St Ste 1925	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Woodland Hills State CA Zip Code 91367-7888	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Randall A Hutsell	<b>Transaction ID:</b> SB28A-13160 <b>Date of Disbursement</b>																				
Mailing Address 6891 Harbor Dr NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Canton State OH Zip Code 44718-3743	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 621 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Gregg Hymowitz

Mailing Address 205 E 61st St

City State Zip Code  
New York NY 10021-8203

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13162

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
John Jacobs

Mailing Address 39 Briarwood Pl

City State Zip Code  
Grosse Pointe Farm MI 48236-3773

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13163

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jerold Kaufman

Mailing Address 18767 Biscayne Blvd

City State Zip Code  
Aventura FL 33180

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13164

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 622 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mark R Kohler

Mailing Address 3101 Milton Ave

City Dallas State TX Zip Code 75205-1449

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13165

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

550.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Koskoff

Mailing Address 350 Fairfield Ave

City Bridgeport State CT Zip Code 06604-6014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13166

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Rosalind Koskoff

Mailing Address 350 Fairfield Ave

City Bridgeport State CT Zip Code 06604-6014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13167

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 623 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Ann Kraus Mailing Address 6927 Tokalon Dr	<b>Transaction ID:</b> SB28A-13168 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75214-3829 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) David Labovitz Mailing Address 700 New Hampshire Ave NW # 505 City Washington State DC Zip Code 20037-2407 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13169 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Miles Lackey Mailing Address 118 5th St., SE City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13170 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 624 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James Lambie

Mailing Address 8 W 3rd St Ste M7

City Winston Salem State NC Zip Code 27101-3928

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13171

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Philip Lasher

Mailing Address Cmr 421 Box 688

City APO State AE Zip Code 09056-0688

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13172

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Philip Lasher

Mailing Address Cmr 421 Box 688

City APO State AE Zip Code 09056-0688

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13173

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2300.00

**TOTAL** This Period (last page this line number only) .....



	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

700.00

1150.00

2300.00

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 626 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Dario L Marengo

Mailing Address 619 N Tuxedo Ave

City Stockton State CA Zip Code 95204-5239

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13177

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy C. McHugh

Mailing Address 19 Hillcrest Mnr

City Rolling Hills Esta State CA Zip Code 90274-4801

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13178

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Bob Methvin

Mailing Address 251 Woodland Dr

City Eufaula State AL Zip Code 36027-1328

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13180

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 627 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas J Methvin

Mailing Address 9829 Wynchase Cir

City State Zip Code  
Montgomery AL 36117-5185

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13181

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
W Daniel Miles, III

Mailing Address 8566 Harbinger Ct

City State Zip Code  
Montgomery AL 36117-7416

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13183

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert L Mills

Mailing Address 849 Greentree Arch

City State Zip Code  
Virginia Beach VA 23451-3787

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13184

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4950.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 628 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Robert M Montgomery, Jr

Mailing Address 1800 S Ocean Blvd

City State Zip Code  
Palm Beach FL 33480-5104

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13185

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

John S Mostyn

Mailing Address 200 Westcott St

City State Zip Code  
Houston TX 77007-7004

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13186

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Randal A Nardone

Mailing Address 1345 Avenue of The Americas

City State Zip Code  
New York NY 10105-0302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13187

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 629 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Michael E Novogratz

Mailing Address 1345 Avenue of The Americas

City State Zip Code  
New York NY 10105-0302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13188

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Wendi Oliver

Mailing Address 100 Winsome Ln

City State Zip Code  
Chapel Hill NC 27516-4701

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13190

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

J Andy Penry

Mailing Address 315 N Boundary St

City State Zip Code  
Raleigh NC 27604-1243

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13191

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 630 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Hillary Perkins

Mailing Address 505 20th St N  
Ste 500B

City Birmingham State AL Zip Code 35203-2605

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13192

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Laura Perkins

Mailing Address 402 Rosebank Ave

City Baltimore State MD Zip Code 21212-3537

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13193

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1650.00

**C.**

Full Name (Last, First, Middle Initial)  
Laura Perkins

Mailing Address 402 Rosebank Ave

City Baltimore State MD Zip Code 21212-3537

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13194

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 631 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Laura Perkins

Mailing Address 402 Rosebank Ave

City Baltimore State MD Zip Code 21212-3537

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13195

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Ada Perry

Mailing Address 731 W Kivett St Apt 200

City Asheboro State NC Zip Code 27203-6200

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13196

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Dean Petitpren

Mailing Address 3747 Riverview Ter N

City East China State MI Zip Code 48054-2213

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13197

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 632 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Petters

Mailing Address 1840 S Ocean Blvd

City Lantana State FL Zip Code 33462-6207

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13198

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Cindy Pierson

Mailing Address 100 Lake Street #11

City San Francisco State CA Zip Code 94118

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13200

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)  
Dorothy Pizzella

Mailing Address 179 clinton road

City brookline State MA Zip Code 2445

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13201

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4630.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 633 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

L Richardson Preyer

Mailing Address 109 Millstone Dr Ste A

City Hillsborough State NC Zip Code 27278-8704

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13204

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Steven G Schiesel

Mailing Address 41 Madison Ave  
Rm 400

City New York State NY Zip Code 10010-2202

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13207

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Scott S Segal

Mailing Address 810 Kanawha Blvd E

City Charleston State WV Zip Code 25301-2807

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13208

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Landis Sexton

Mailing Address 7172 Wynlakes Blvd

City Montgomery State AL Zip Code 36117-7553

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13210

Date of Disbursement

/   /

Amount of Each Disbursement this Period

900.00

**B.**

Full Name (Last, First, Middle Initial)

Linnea W Smith

Mailing Address 309 S Laurel Ave

City Charlotte State NC Zip Code 28207-1503

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13211

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Lauren Speeth

Mailing Address PO Box 431

City Burlingame State CA Zip Code 94011-0431

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13212

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 635 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Nicholas Timko

Mailing Address 20 Vesey St  
3RD FLOOR

City New York State NY Zip Code 10007-2913

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13215

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark Valentine

Mailing Address 405 Chamberlain St

City Raleigh State NC Zip Code 27607-7313

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13216

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1300.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary Weiss

Mailing Address 1051 Port Malabar Blvd NE

City Palm Bay State FL Zip Code 32905-5153

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13217

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Laurie White

Mailing Address 101 Boulder Cv

City Macon State GA Zip Code 31220-8717

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13218

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Jason Whitler

Mailing Address 1029 Cross Gate Rd

City Winston Salem State NC Zip Code 27106-6324

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13219

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

Jim Whitler

Mailing Address 1029 Cross Gate Rd

City Winston Salem State NC Zip Code 27106-6324

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13220

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4410.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 637 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Daniel E Wilcoxon

Mailing Address 2114 K St

City Sacramento State CA Zip Code 95816-4921

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13221

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lanny T Wilson

Mailing Address 1442 Quadrant Cir

City Wilmington State NC Zip Code 28405-4219

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13222

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
James Windham

Mailing Address 116 Eagles Club Dr

City Stockbridge State GA Zip Code 30281-6372

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13223

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 638 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert Zaytoun

Mailing Address 304 Hillcrest Rd

City Raleigh State NC Zip Code 27605-1722

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13225

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
John P Zelbst

Mailing Address 25478 State Highway 115

City Lawton State OK Zip Code 73507-8500

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13226

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Brian L Zimmerman

Mailing Address 5840 Knob Hill Drive, NW

City Canton State OH Zip Code 44718

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13227

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lindsay Zimmerman

Mailing Address 1926 Mt Vernon Blvd NW

City State Zip Code  
Canton OH 44709-2721

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13228

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
John Zwiebel

Mailing Address 101 Baymount St

City State Zip Code  
Santa Cruz CA 95062-3459

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13229

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary E Alexander

Mailing Address 44 Montgomery St  
Ste 1303

City State Zip Code  
San Francisco CA 94104-4602

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13230

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Evoydeene Bailey

Mailing Address 2445 Selwyn Ave. 504

City State Zip Code  
Charlotte NC 28204

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13231

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Steven T Baron

Mailing Address 5616 Yolanda Cir

City State Zip Code  
Dallas TX 75229-6430

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13232

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph Bruegger

Mailing Address 5019 Tanbark Rd

City State Zip Code  
Dallas TX 75229-4337

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13233

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 641 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Vicki J Divoll

Mailing Address 3839 Livingston St NW

City Washington State DC Zip Code 20015-2802

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13236

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2050.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen C Friedheim

Mailing Address 1 Smith Rd

City Greenwich State CT Zip Code 06830-7036

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13237

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

2200.00

**C.**

Full Name (Last, First, Middle Initial)

Alexander M Hall

Mailing Address 1414 Country Club Rd

City Wilmington State NC Zip Code 28403-4004

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13238

Date of Disbursement

03 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 642 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Don Henley

Mailing Address 21650 Oxnard St Ste 1925

City State Zip Code  
Woodland Hills CA 91367-7888

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13239

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Olga I Hildenbrand

Mailing Address 2315 Washington St E

City State Zip Code  
Charleston WV 25311-2312

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13240

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
James A Huguenard

Mailing Address 705 Pifer Rd

City State Zip Code  
Houston TX 77024-5421

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13241

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 643 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert Koenigsberger

Mailing Address 20 Dayton Ave

City State Zip Code  
Greenwich CT 06830-6478

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13242

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**B.**

Full Name (Last, First, Middle Initial)  
Russell S Kussman

Mailing Address 10866 Wilshire Blvd

City State Zip Code  
Los Angeles CA 90024-4300

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13243

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**C.**

Full Name (Last, First, Middle Initial)  
Blair B MacInnes

Mailing Address 26 Old Harter Rd

City State Zip Code  
Morristown NJ 07960-6364

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13244

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 644 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Kaola Phoenix Mailing Address 103 Longwood Dr	<b>Transaction ID:</b> SB28A-13245 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
City Chapel Hill State NC Zip Code 27514-9502 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																				
2300.00																						
<b>B.</b> Full Name (Last, First, Middle Initial) Regina Pyle Mailing Address 124 Mt Auburn St Ste 200N City Cambridge State MA Zip Code 02138-5787 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13246 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2100.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
2100.00																						
<b>C.</b> Full Name (Last, First, Middle Initial) Perry Safran Mailing Address 1424 Granada Dr City Raleigh State NC Zip Code 27612-5109 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13248 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2300.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8	2300.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	8													
2300.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

**6700.00**

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

03 / 24 / 2008

03 / 24 / 2008

State:  District:

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 646 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Alexander D. Forger	<b>Transaction ID:</b> SB28A-13252 <b>Date of Disbursement</b>																				
Mailing Address 20 Sutton Pl S Apt 15C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City New York State NY Zip Code 10022-4165	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Barbara Schlesinger	<b>Transaction ID:</b> SB28A-13253 <b>Date of Disbursement</b>																				
Mailing Address 387 Ocean Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Golden Beach State FL Zip Code 33160-2211	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Shelton J Schlesinger	<b>Transaction ID:</b> SB28A-13254 <b>Date of Disbursement</b>																				
Mailing Address 387 Ocean Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Golden Beach State FL Zip Code 33160-2211	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table>	2100.00																			
2100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 647 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Blair Singer Mailing Address 39 Plaza St W Apt 3A	<b>Transaction ID:</b> SB28A-13255 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Brooklyn NY 11217-3949 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Amy F Solomon Mailing Address 430 Crane Blvd City State Zip Code Los Angeles CA 90065-5053 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13256 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Anna F Stein Mailing Address 310 E Forest Dr City State Zip Code Raleigh NC 27605-1754 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13257 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 648 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kathy Taft

Mailing Address 3024 Dartmouth Dr

City Greenville State NC Zip Code 27858-6745

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13258

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas F Taft, Sr

Mailing Address PO Box 566

City Greenville State NC Zip Code 27835-0566

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13259

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Caitlin Vega

Mailing Address 3669 Columbia Dr.

City Napa State CA Zip Code 94558

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13260

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4850.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 649 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Carl Page

Mailing Address 5214F Diamond Heights Blvd

City State Zip Code  
San Francisco CA 94131

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13261

Date of Disbursement

/   /

Amount of Each Disbursement this Period

128.00

**B.**

Full Name (Last, First, Middle Initial)  
Christopher Pak

Mailing Address 3250 Wilshire Blvd Fl 400

City State Zip Code  
Los Angeles CA 90010

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13262

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)  
Elizabeth Summers

Mailing Address 3932 Reinhardt Dr

City State Zip Code  
Oakland CA 94619

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13263

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1986.10

**SUBTOTAL** of Disbursements This Page (optional) .....

2144.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 650 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Edward Adams

Mailing Address 2010 W 49th St

City State Zip Code  
Minneapolis MN 55419

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13264

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**B.**

Full Name (Last, First, Middle Initial)  
Gerhard Oertel

Mailing Address 330 Kensington Dr

City State Zip Code  
Madison WI 53704

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13265

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Harold Wilensky

Mailing Address 1311 Grizzly Peak Blvd

City State Zip Code  
Bekeley CA 94708

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13266

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 651 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Steven T Baron

Mailing Address 5616 Yolanda Cir

City Dallas State TX Zip Code 75229-6430

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13674

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Claire Blumenthal

Mailing Address 4649 Village Dr

City Atlanta State GA Zip Code 30338-5742

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Breit

Mailing Address 999 Waterside Dr

City Norfolk State VA Zip Code 23510-3300

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13676

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 652 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jeff S. Burum

Mailing Address 5033 Earl Ct

City Alta Loma State CA Zip Code 91701-1410

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13677

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
W. Thomas Comerford

Mailing Address 3500 Stonegate Ct

City Winston Salem State NC Zip Code 27104-1824

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13678

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard E Goldman

Mailing Address 8 Audrey Ct

City Tiburon State CA Zip Code 94920-1610

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13679

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 653 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Michael Berman

Mailing Address 1067 Sasco Hill Rd

City Fairfield State CT Zip Code 06824-6392

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-13680

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Randall Hutsell

Mailing Address 6891 Harbor Dr NW

City Canton State OH Zip Code 44718-3743

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-13681

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Gregg Hymowitz

Mailing Address 205 E 61st St

City New York State NY Zip Code 10021-8203

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-13682

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 654 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas J. Methvin	<b>Transaction ID:</b> SB28A-13683 <b>Date of Disbursement</b>																				
Mailing Address 9829 Wynchase Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Montgomery State AL Zip Code 36117-5185	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) W. Daniel Miles	<b>Transaction ID:</b> SB28A-13684 <b>Date of Disbursement</b>																				
Mailing Address 8566 Harbinger Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Montgomery State AL Zip Code 36117-7416	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Wendi Oliver, II	<b>Transaction ID:</b> SB28A-13685 <b>Date of Disbursement</b>																				
Mailing Address 100 Winsome Ln	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	8												
City Chapel Hill State NC Zip Code 27516-4701	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 655 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Henry A Phillips Mailing Address 679 Athens St.	<b>Transaction ID:</b> SB28A-13686 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code Hartwell GA 30643 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2100.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) J. Cole Portis Mailing Address 9232 Gainswood City State Zip Code Montgomery AL 36117-5120 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13687 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) David Rigsby Mailing Address PO Box 44 City State Zip Code Embudo NM 87531-0044 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13688 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>200.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**4600.00**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 656 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Landis Sexton

Mailing Address 7172 Wynlakes Blvd

City Montgomery State AL Zip Code 36117-7553

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13689

Date of Disbursement

/   /

Amount of Each Disbursement this Period

900.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas C. Taft

Mailing Address PO Box 566

City Greenville State NC Zip Code 27835-0566

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13690

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Zaytoun

Mailing Address 304 Hillcrest Rd

City Raleigh State NC Zip Code 27605-1722

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13691

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 657 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Rice

Mailing Address 676 Olde Salt Run

City State Zip Code  
Mt Pleasant SC 29464-2788

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13692

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Alexander Forger

Mailing Address 20 Sutton Pl S Apt 15C

City State Zip Code  
New York NY 10022-4165

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13697

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Laura Belin

Mailing Address 1705 Plaza Cir

City State Zip Code  
Windsor Heights IA 50322-5760

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13698

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 658 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Brian L Zimmerman

Mailing Address 5840 Knob Hill Dr., NW

City State Zip Code  
Canton OH 44718

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13703

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert H Arnow

Mailing Address 14 Butler Rd

City State Zip Code  
Scarsdale NY 10583-1618

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13329

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David Russell Badger

Mailing Address 2108 South Blvd  
Ste 118

City State Zip Code  
Charlotte NC 28203-5098

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13330

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 659 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Karen Haugerud Bahl

Mailing Address 809 Ridge Rd S

City State Zip Code  
Preston MN 55965-1216

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13332

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Evoydeene Bailey

Mailing Address 2445 Selwyn Ave. 504

City State Zip Code  
Charlotte NC 28204

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13333

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Jack M Bailey

Mailing Address 2790 Fairfield Ave

City State Zip Code  
Shreveport LA 71104-2983

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13334

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) .....

4800.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 660 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)

Robin M Bailey

Mailing Address 11738 Dan Maples Dr

City State Zip Code  
Charlotte NC 28277-9653

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13335

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Steven A Bailey

Mailing Address 341 Fort Mitchell Dr

City State Zip Code  
Chase City VA 23924-5335

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13336

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)

Amy Bair

Mailing Address 737 Main St

City State Zip Code  
Buffalo NY 14203-1335

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13337

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

1800.00

SUBTOTAL of Disbursements This Page (optional) .....

6400.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 661 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
H Mitchell Baker, III

Mailing Address 107 W Salisbury St

City State Zip Code  
Wrightsville Beach NC 28480-1813

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13338

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Coralee Baldwin

Mailing Address PO Box 579

City State Zip Code  
Marshall TX 75671-0579

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13339

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jane Baldwin

Mailing Address PO Box 352

City State Zip Code  
Wilson WY 83014-0352

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13340

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 662 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Scott Baldwin

Mailing Address PO Box 579

City Marshall State TX Zip Code 75671-0579

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13341

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
David A Ball

Mailing Address 762 9th St  
# 501

City Durham State NC Zip Code 27705-4803

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13342

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Marie Barnes

Mailing Address 4841 Brookwood Dr SW

City Mableton State GA Zip Code 30126-1213

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13343

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 663 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Steven T Baron

Mailing Address 5616 Yolanda Cir

City Dallas State TX Zip Code 75229-6430

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13344

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Barrett

Mailing Address 100 Morgan Bluff Ln

City Chapel Hill State NC Zip Code 27517-4925

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13345

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.59

**C.**

Full Name (Last, First, Middle Initial)  
James Bartimus

Mailing Address 11541 Cherokee Ct

City Leawood State KS Zip Code 66211-3080

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13346

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4925.59

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 664 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Louise A. Baum

Mailing Address PO Box 5814

City State Zip Code  
Santa Fe NM 87502-5814

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13347

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Patricia Murguia Bauman

Mailing Address 2358 Massachusetts Ave NW

City State Zip Code  
Washington DC 20008-2801

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13348

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Charles L Becton

Mailing Address 3011 Wade Rd

City State Zip Code  
Durham NC 27705-5630

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13349

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3300.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 665 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Janet Beger

Mailing Address 1612 Maplewood Dr

City  
Rockford

State  
IL

Zip Code  
61107-1877

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13350

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Laurence S Berman

Mailing Address 510 Walnut St  
Ste 500

City  
Philadelphia

State  
PA

Zip Code  
19106-3625

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13352

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1150.00

**C.**

Full Name (Last, First, Middle Initial)

Dennis Black

Mailing Address 221 W Stewart Ave Ste 209

City  
Medford

State  
OR

Zip Code  
97501-3647

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13354

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 666 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Richard Bodlaender

Mailing Address 6009 106th Ave NE

City State Zip Code  
Kirkland WA 98033-7014

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13355

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1400.00

**B.**

Full Name (Last, First, Middle Initial)  
Feroze Bottla

Mailing Address 9502 Lavill Ct

City State Zip Code  
Windermere FL 34786-8313

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13356

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Larry P Boyd

Mailing Address 2777 Allen Pkwy Ste 1400

City State Zip Code  
Houston TX 77019-2129

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13357

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	x	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

2300.00

2300.00

2300.00

FE1AN060.PDF

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 668 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Christine Burdo

Mailing Address 5 Meadow Ln

City Lloyd Harbor State NY Zip Code 11743-9721

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13361

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Flora Cafaro

Mailing Address 2445 Belmont Ave

City Youngstown State OH Zip Code 44505-2405

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13362

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Cort B Casady

Mailing Address 1624 3rd St

City Manhattan Beach State CA Zip Code 90266-6304

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13364

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

125.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 669 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Irene Chang Mailing Address 2275 Mountain Dr	<b>Transaction ID:</b> SB28A-13365 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Bartlesville OK 74003-6954 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>909.22</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Margaret Clarson Mailing Address 2360 Pacific Ave City State Zip Code San Francisco CA 94115-1263 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13366 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Beverly A Clifford Mailing Address 806 W Randolph St PO Box 169 City State Zip Code Roanoke IL 61561-7789 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13367 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**5509.22**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 670 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James J Clifford

Mailing Address 806 W Randolph St  
PO Box 169

City Roanoke State IL Zip Code 61561-7789

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13368

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Louise W Coggins

Mailing Address 150 Beach Rd S

City Wilmington State NC Zip Code 28411-9222

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13369

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen D Coggins

Mailing Address 150 Beach Rd S

City Wilmington State NC Zip Code 28411-9222

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13370

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 671 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) David Cohen	<b>Transaction ID:</b> SB28A-13371 <b>Date of Disbursement</b>																				
Mailing Address 63 The esplanade	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City New rochelle State NY Zip Code 10804	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">450.00</td> </tr> </table>	450.00																			
450.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Cohen	<b>Transaction ID:</b> SB28A-13372 <b>Date of Disbursement</b>																				
Mailing Address 1800 S Ocean Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Pompano Beach State FL Zip Code 33062-7922	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">550.00</td> </tr> </table>	550.00																			
550.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Sally Schindel Cone	<b>Transaction ID:</b> SB28A-13373 <b>Date of Disbursement</b>																				
Mailing Address 500 Country Club Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Greensboro State NC Zip Code 27408-5710	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3300.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 672 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jane Cowles

Mailing Address 928 N Avenida Caballeros

City State Zip Code  
Palm Springs CA 92262

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13374

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Larry D Crabtree

Mailing Address 3636 Baxter Rd

City State Zip Code  
Joelton TN 37080-8754

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13375

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)  
Burton Craige

Mailing Address 3404 Churchill Rd

City State Zip Code  
Raleigh NC 27607-6810

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13376

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 673 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
John J. Davis, Jr.

Mailing Address 1242 de Haro St

City State Zip Code  
San Francisco CA 94107-3237

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13377

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

63.40

B.

Full Name (Last, First, Middle Initial)  
George Del Hoyo

Mailing Address 13801 Ventura Blvd

City State Zip Code  
Sherman Oaks CA 91423-3603

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13379

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Erin Denton

Mailing Address 1620 Lamego Dr

City State Zip Code  
Glendale CA 91207-1208

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13380

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

4663.40

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 674 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) James T Denton	<b>Transaction ID:</b> SB28A-13381 <b>Date of Disbursement</b>																				
Mailing Address 1620 Lamego Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Glendale State CA Zip Code 91207-1208	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Vicki J Divoll	<b>Transaction ID:</b> SB28A-13382 <b>Date of Disbursement</b>																				
Mailing Address 3839 Livingston St NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Washington State DC Zip Code 20015-2802	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2050.00</td> </tr> </table>	2050.00																			
2050.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Johanna Dordick	<b>Transaction ID:</b> SB28A-13384 <b>Date of Disbursement</b>																				
Mailing Address 116 1/2 N Kings Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Los Angeles State CA Zip Code 90048-2625	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

4550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 675 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lee Dorris

Mailing Address 17432 Garrett Rd

City Johnston City State IL Zip Code 62951-2415

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13386

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael D Drescher

Mailing Address 1654 N Doheny Dr

City West Hollywood State CA Zip Code 90069-1106

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13387

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
James R Duffy, Jr

Mailing Address PO Box 1307

City Cutchogue State NY Zip Code 11935-0889

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13388

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1725.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 676 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

James R Duffy, Sr

Mailing Address 2995 Wunneweta Rd

City State Zip Code  
Cutchogue NY 11935-1617

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13389

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Ellen Duffy

Mailing Address 2995 Wunneweta Rd

City State Zip Code  
Cutchogue NY 11935-1617

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13390

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Eisner

Mailing Address 411 N Oakhurst Dr Unit 104

City State Zip Code  
Beverly Hills CA 90210-4038

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13391

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 677 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Ensign	<b>Transaction ID:</b> SB28A-13392 <b>Date of Disbursement</b>																				
Mailing Address 501 Watkins Pond Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Rockville State MD Zip Code 20850-5602	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Victor Farah	<b>Transaction ID:</b> SB28A-13393 <b>Date of Disbursement</b>																				
Mailing Address 5417 Olde South Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Raleigh State NC Zip Code 27606-9248	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Sue Bruton Farrell	<b>Transaction ID:</b> SB28A-13394 <b>Date of Disbursement</b>																				
Mailing Address 1302 Park Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Raleigh State NC Zip Code 27605-1726	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">71.08</td> </tr> </table>	71.08																			
71.08																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4671.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 678 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Steve Faure

Mailing Address 1509 Garnaas Dr.

City Austin State TX Zip Code 78758

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13395

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Andrew J Feldman

Mailing Address 9 Withington Rd

City Scarsdale State NY Zip Code 10583-3305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13396

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Frayda B Feldman

Mailing Address 4 Helena Dr

City Chappaqua State NY Zip Code 10514-1905

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13397

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 679 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lee Fikes

Mailing Address 4025 Beverly Dr

City State Zip Code  
Dallas TX 75205-2849

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13399

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Heather Fisher

Mailing Address 5252 Peninsula Dr NW

City State Zip Code  
Canton OH 44718-1630

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13400

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Fisher

Mailing Address 5252 Peninsula Dr NW

City State Zip Code  
Canton OH 44718-1630

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13401

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 680 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine McArthur Floyd	<b>Transaction ID:</b> SB28A-13402 <b>Date of Disbursement</b>																				
Mailing Address 6320 Peake Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Macon State GA Zip Code 31210-3960	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) David L Fortier	<b>Transaction ID:</b> SB28A-13403 <b>Date of Disbursement</b>																				
Mailing Address 802 Towanda Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Bloomington State IL Zip Code 61701-3337	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ernie Frankel	<b>Transaction ID:</b> SB28A-13404 <b>Date of Disbursement</b>																				
Mailing Address 12623 Promontory Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Los Angeles State CA Zip Code 90049	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">37.00</td> </tr> </table>	37.00																			
37.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4637.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 681 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Herbert H Franks

Mailing Address PO Box 5

City Marengo State IL Zip Code 60152-0005

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13405

Date of Disbursement

/   /

Amount of Each Disbursement this Period

900.00

**B.**

Full Name (Last, First, Middle Initial)  
Jaine E Fraser

Mailing Address 6324 Waggoner Dr

City Dallas State TX Zip Code 75230-4016

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13406

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen C Friedheim

Mailing Address 1 Smith Rd

City Greenwich State CT Zip Code 06830-7036

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13408

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 682 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Simone Fulmer

Mailing Address 17205 Whimbrel Ln

City Edmond State OK Zip Code 73012-8412

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13409

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2045.00

**B.**

Full Name (Last, First, Middle Initial)  
Herman E Gaskins, Jr

Mailing Address 115 Riverview Dr

City Washington State NC Zip Code 27889-9763

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13410

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey L Geren

Mailing Address 22256 Dumetz Rd

City Woodland Hills State CA Zip Code 91364-3000

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13411

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4545.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 683 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Heidi Giles

Mailing Address 5503 Copper Peak Cir

City State Zip Code  
Herriman UT 84096-1863

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13412

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Sidney W Gilreath

Mailing Address 508 Union Ave Unit 501

City State Zip Code  
Knoxville TN 37902-2163

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13413

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Gina Ginsburg

Mailing Address 4707 Park Ln

City State Zip Code  
Dallas TX 75220-2026

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13414

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 684 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Patrick Girardi Mailing Address 208 18th St	<b>Transaction ID:</b> SB28A-13415 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Manhattan Beach CA 90266-4651 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Traci Goldman Mailing Address 8 Audrey Ct	<b>Transaction ID:</b> SB28A-13416 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Tiburon CA 94920-1610 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Amy Goodale Mailing Address 2901 Timpani Trl	<b>Transaction ID:</b> SB28A-13417 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Apex NC 27539-3621 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 685 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Neva Goodman

Mailing Address 30 Rockefeller Plz  
Rm 5600

City New York State NY Zip Code 10112-0015

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13418

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Leo J Govoni

Mailing Address 4912 Creekside Dr

City Clearwater State FL Zip Code 33760-4019

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13419

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Joanna Greenstone

Mailing Address 3355 Blackburn St

City Dallas State TX Zip Code 75204-1588

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13421

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 686 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Hardy Gregory	<b>Transaction ID:</b> SB28A-13422 <b>Date of Disbursement</b>																				
Mailing Address 305 E Union St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Vienna State GA Zip Code 31092-1509	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">700.00</td> </tr> </table>	700.00																			
700.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) John Gresham	<b>Transaction ID:</b> SB28A-13423 <b>Date of Disbursement</b>																				
Mailing Address 717 E Kingston Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Charlotte State NC Zip Code 28203-5121	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Keith Griffin	<b>Transaction ID:</b> SB28A-13424 <b>Date of Disbursement</b>																				
Mailing Address 10806 Esther Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Los Angeles State CA Zip Code 90064-3225	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 687 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joshua D Gruenberg

Mailing Address 2169 1st Ave

City State Zip Code  
San Diego CA 92101-2013

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13425

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Lauren Guhl

Mailing Address 2600 Pine Vly

City State Zip Code  
Edmond OK 73012-4362

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13426

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Kenneth E Haigler

Mailing Address PO Box 4108

City State Zip Code  
Wilmington NC 28406-1108

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13427

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 688 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Alexander M Hall	<b>Transaction ID:</b> SB28A-13428 <b>Date of Disbursement</b>																				
Mailing Address 1414 Country Club Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Wilmington State NC Zip Code 28403-4004	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ina H Hart	<b>Transaction ID:</b> SB28A-13429 <b>Date of Disbursement</b>																				
Mailing Address 905 Sutton Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Rocky Mount State NC Zip Code 27801-7472	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Helen Haugerud	<b>Transaction ID:</b> SB28A-13430 <b>Date of Disbursement</b>																				
Mailing Address 25887 County 12	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Preston State MN Zip Code 55965-1520	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

3400.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Marilyn Hausfeld Mailing Address 9207 Coronado Ter	<b>Transaction ID:</b> SB28A-13431 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Fairfax VA 22031-3833 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Don Henley Mailing Address 21650 Oxnard St Ste 1925 City State Zip Code Woodland Hills CA 91367-7888 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13433 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph A Herzenberg Mailing Address 71 Maxwell Rd City State Zip Code Chapel Hill NC 27517-4044 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13434 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2300.00</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 690 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Nancy Heyser

Mailing Address 85 Rainbow Trl

City Sedona State AZ Zip Code 86351-7875

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13435

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Betty S Hooker

Mailing Address 10 Warfield Ct

City Greensboro State NC Zip Code 27406-9334

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13437

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Kenneth W Hooks

Mailing Address 2034 Club Rd

City Birmingham State AL Zip Code 35244-1412

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13438

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

1800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 691 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kenneth H Howe

Mailing Address 1648 Promenade Cir

City Port Orange State FL Zip Code 32129-7513

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13440

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**B.**

Full Name (Last, First, Middle Initial)  
James A Huguenard

Mailing Address 705 Pifer Rd

City Houston State TX Zip Code 77024-5421

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13441

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Karita Hummer

Mailing Address 96 Fox Ave.

City San Jose State CA Zip Code 95110

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13442

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1184.11

**SUBTOTAL** of Disbursements This Page (optional) .....

5684.11

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 692 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James F Humphreys

Mailing Address 500 Virginia St E Ste 800

City Charleston State WV Zip Code 25301-2125

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13443

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Carolyn L Hunt

Mailing Address 6653D Governor Hunt Rd

City Lucama State NC Zip Code 27851-9415

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13444

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
John Isselmann, Jr

Mailing Address 9320 SW Panorama PI

City Portland State OR Zip Code 97225-4108

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13445

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 693 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Peter L Jacobson

Mailing Address 405 Beach Rd N

City State Zip Code  
Wilmington NC 28411-9212

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13446

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1800.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark T Johnson

Mailing Address 6547 Saroni Dr

City State Zip Code  
Oakland CA 94611-2340

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13448

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Gregory L Jones

Mailing Address 1904 Edgemont Ln

City State Zip Code  
Wilmington NC 28405-4154

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13449

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 694 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robin C Kanner

Mailing Address 1550 Dufossat St

City State Zip Code  
New Orleans LA 70115-4023

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13452

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Randall R Kaplan

Mailing Address 302 Kemp Rd W

City State Zip Code  
Greensboro NC 27410-6043

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13453

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
James Kelleher

Mailing Address 669 9th Ave S

City State Zip Code  
Naples FL 34102-6937

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13454

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 695 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert Kelley

Mailing Address 700 SE 3rd Ave

City State Zip Code  
Fort Lauderdale FL 33316-1154

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13456

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Adelaide D Key

Mailing Address 300 Webb Cove Rd

City State Zip Code  
Asheville NC 28804-1931

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13457

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeanie Kilgour

Mailing Address 6727 Woods Creek Dr

City State Zip Code  
Charlevoix MI 49720-9395

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13458

Date of Disbursement

/   /

Amount of Each Disbursement this Period

404.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4804.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 696 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Betty Kinser

Mailing Address 406 E Ironwood Dr

City Normal State IL Zip Code 61761-5305

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13459

Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

**B.**

Full Name (Last, First, Middle Initial)

Dusty Elias Kirk

Mailing Address 108 Woodland Rd

City Pittsburgh State PA Zip Code 15232-2816

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13460

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Koenigsberger

Mailing Address 20 Dayton Ave

City Greenwich State CT Zip Code 06830-6478

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13461

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2751.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 697 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Russell S Kussman

Mailing Address 10866 Wilshire Blvd

City State Zip Code  
Los Angeles CA 90024-4300

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13462

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**B.**

Full Name (Last, First, Middle Initial)  
Andrew Lack

Mailing Address 650 Madison Ave

City State Zip Code  
New York NY 10022-1029

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13463

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Elizabeth K Lack

Mailing Address 650 Madison Ave

City State Zip Code  
New York NY 10022-1029

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13464

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 698 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert E Lahm

Mailing Address 234 Dewitt St

City State Zip Code  
Syracuse NY 13203-1636

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13465

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Bonnilu Lair

Mailing Address 43 Beechwood Ave

City State Zip Code  
Manhasset NY 11030-2408

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13466

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

580.35

**C.**

Full Name (Last, First, Middle Initial)  
Anne Lancione

Mailing Address 31730 Maritime Ct

City State Zip Code  
Avon Lake OH 44012-2903

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13467

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3880.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 699 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John A Lancione

Mailing Address 31730 Maritime Ct

City Avon Lake State OH Zip Code 44012-2903

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13468

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel H Leeds

Mailing Address 3205 R St NW

City Washington State DC Zip Code 20007-2941

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13469

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Sunita Leeds

Mailing Address 3205 R St NW

City Washington State DC Zip Code 20007-2941

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13470

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 700 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kathryn Levy

Mailing Address PO Box 3230

City State Zip Code  
Sag Harbor NY 11963

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13471

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)  
Kathy Lewis

Mailing Address 2809 Gateshead Dr

City State Zip Code  
Winston Salem NC 27106-5203

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13472

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Lewis

Mailing Address 2809 Gateshead Dr

City State Zip Code  
Winston Salem NC 27106-5203

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13473

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 701 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Susan Lewis

Mailing Address 6750 Sharon Woods Blvd

City Columbus State OH Zip Code 43229-1447

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13474

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Steven Littman

Mailing Address 555 5th Ave Fl 6

City New York State NY Zip Code 10017-2416

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13475

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)  
Ann D Logan

Mailing Address 5216 Chamberlin Ave

City Chevy Chase State MD Zip Code 20815-6662

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13476

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 702 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Ronald Arthur Lowry

Mailing Address PO Box 3005

City Marietta State GA Zip Code 30061-3005

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13477

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Victoria Talton Lucas

Mailing Address 6095 Buffalo Rd

City Selma State NC Zip Code 27576-6115

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13478

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert F Lucchino

Mailing Address 169 Shadow Ridge Dr

City Pittsburgh State PA Zip Code 15238-2133

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13479

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 703 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Michael Macfadden

Mailing Address 6244 26th Ave NE

City State Zip Code  
Seattle WA 98115-7110

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13480

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Blair B MacInnes

Mailing Address 26 Old Harter Rd

City State Zip Code  
Morristown NJ 07960-6364

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13481

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Adam Malone

Mailing Address 4509 Belvedere Pl SE

City State Zip Code  
Marietta GA 30067-4082

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 704 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Amy Mancuso

Mailing Address 319 Sprucewood Rd

City Lake Mary State FL Zip Code 32746-5902

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13483

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

John W Mancuso

Mailing Address 319 Sprucewood Rd

City Lake Mary State FL Zip Code 32746-5902

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13484

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2200.00

**C.**

Full Name (Last, First, Middle Initial)

James Mann

Mailing Address 10 Old Road Ln

City Mount Kisco State NY Zip Code 10549-4524

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13485

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 705 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth Manning	<b>Transaction ID:</b> SB28A-13486 <b>Date of Disbursement</b>																				
Mailing Address 302 Kemp Rd W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Greensboro State NC Zip Code 27410-6043	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kathy Manning	<b>Transaction ID:</b> SB28A-13487 <b>Date of Disbursement</b>																				
Mailing Address 302 Kemp Rd W	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Greensboro State NC Zip Code 27410-6043	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kandathil M. Mathew	<b>Transaction ID:</b> SB28A-13488 <b>Date of Disbursement</b>																				
Mailing Address 165 Glen Eagle Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City McDonough State GA Zip Code 30253-4231	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 706 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Sushila Mathew	<b>Transaction ID:</b> SB28A-13489 <b>Date of Disbursement</b>																				
Mailing Address 165 Glen Eagle Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City McDonough State GA Zip Code 30253-4231	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Jose J Mauricio	<b>Transaction ID:</b> SB28A-13490 <b>Date of Disbursement</b>																				
Mailing Address 4747 S Conway Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Orlando State FL Zip Code 32812-1245	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jacqueline Mccaffrey	<b>Transaction ID:</b> SB28A-13491 <b>Date of Disbursement</b>																				
Mailing Address 32 Pearl St Apt 4A	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City New York State NY Zip Code 10004-2107	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">1331.10</td> </tr> </table>	1331.10																			
1331.10																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**5931.10**

**TOTAL** This Period (last page this line number only) .....

	23		24		25		26		27a
	27b	X	28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
John Edwards for President

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 708 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
George E. McLaughlin

Mailing Address 1643 Monaco Pkwy

City State Zip Code  
Denver CO 80220-1642

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13496

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**B.**

Full Name (Last, First, Middle Initial)  
Joyce L McReynolds

Mailing Address PO Box 141

City State Zip Code  
Brookston IN 47923-0141

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13497

Date of Disbursement

/   /

Amount of Each Disbursement this Period

949.00

**C.**

Full Name (Last, First, Middle Initial)  
R G Methvin

Mailing Address 251 Woodland Dr

City State Zip Code  
Eufaula AL 36027-1328

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13498

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3949.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 709 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Marlene N Meyerson

Mailing Address PO Box 300

City Tesuque State NM Zip Code 87574-0300

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13499

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Buster Middlebrooks

Mailing Address 265 River Rte

City Magnolia Springs State AL Zip Code 36555-9713

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13500

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Sandra Middlebrooks

Mailing Address 265 River Rte

City Magnolia Springs State AL Zip Code 36555-9713

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13501

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 710 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jason Miller

Mailing Address IR  
IR

City IR State IR Zip Code IR

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13502

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
David Mills

Mailing Address 1205 Pacific Ave  
Suite 203

City Santa Cruz State CA Zip Code 95060-3936

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13503

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Dale Minami

Mailing Address 820 Blair Ave

City Oakland State CA Zip Code 94611-3447

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13504

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 711 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Robin Mitchell <hr/> Mailing Address PO Box 444	<b>Transaction ID:</b> SB28A-13505 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	5		2	0	0	8													
City Athens State IL Zip Code 62613-0444 Purpose of Disbursement Contribution Refund Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2300.00</td> </tr> </table>	2300.00																				
2300.00																						
<b>B.</b> Full Name (Last, First, Middle Initial) Charles G Monnett, III <hr/> Mailing Address 6014 Lakeview Dr City Charlotte State NC Zip Code 28270-5238 Purpose of Disbursement Contribution Refund Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13506 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8	2100.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	5		2	0	0	8													
2100.00																						
<b>C.</b> Full Name (Last, First, Middle Initial) Janice Montross <hr/> Mailing Address 9400 Mud Creek Rd City Indianapolis State IN Zip Code 46256-9318 Purpose of Disbursement Contribution Refund Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB28A-13507 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2300.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8	2300.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	5		2	0	0	8													
2300.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

**6700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 712 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John B Morgan

Mailing Address 1887 Bridgewater Dr

City Lake Mary State FL Zip Code 32746-6910

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13508

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Larry W Morris

Mailing Address 1248 Willow Way E

City Alexander City State AL Zip Code 35010-6314

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Daryl J Morton

Mailing Address 109 Carriage Way

City Macon State GA Zip Code 31210-8624

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13511

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1280.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5880.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 713 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Domingo M Moya

Mailing Address 12224 SW 101st Ter

City  
Miami

State  
FL

Zip Code  
33186-2517

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13512

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2200.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Nathan

Mailing Address 9663 Santa Monica Blvd

City  
Beverly Hills

State  
CA

Zip Code  
90210-4303

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13514

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

Artemis Nazarian

Mailing Address 147 Demarest Ave

City  
Englewood

State  
NJ

Zip Code  
07632-1923

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13515

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 714 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Evaline B Neff

Mailing Address 8315 N Brook Ln Apt 306

City Bethesda State MD Zip Code 20814-2633

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13516

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Cecelia A Norman

Mailing Address 424 Country Club Ter

City Edmond State OK Zip Code 73025-2731

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13517

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Nancy B Norwood

Mailing Address 216 Ridgewood Dr

City Goldsboro State NC Zip Code 27534-7505

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13518

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 715 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Mary Norris Oglesby

Mailing Address 1830 N Lakeshore Dr

City State Zip Code  
Chapel Hill NC 27514-6733

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13519

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2285.00

**B.**

Full Name (Last, First, Middle Initial)

Peter OHagan

Mailing Address 1165 Fifth Ave Apt 9 A/B

City State Zip Code  
New York NY 10029

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13520

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Priscilla Oien

Mailing Address 22759 SW 65th Avenue

City State Zip Code  
Tualatin OR 97062

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13521

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 716 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Carl Page

Mailing Address 5214F Diamond Heights Blvd

City State Zip Code  
San Francisco CA 94131-2175

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13522

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Paley

Mailing Address 812 Park Ave

City State Zip Code  
New York NY 10021-2759

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13523

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Keith F Park

Mailing Address 655 W Broadway Ste 1900

City State Zip Code  
San Diego CA 92101-8498

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13524

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 717 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

E Spencer Parris

Mailing Address 410 Glenwood Ave  
Ste 200

City Raleigh State NC Zip Code 27603-1249

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13525

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Henry Patterson

Mailing Address PO Box 2452

City Chapel Hill State NC Zip Code 27515-2452

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Christopher Paxos

Mailing Address 7237 Brycewood Cir NW

City North Canton State OH Zip Code 44720-6388

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13527

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 718 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John Peick

Mailing Address 3615 254th Ave SE

City Issaquah State WA Zip Code 98029-5769

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-13528

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Henry A Phillips

Mailing Address 679 Athens St

City Hartwell State GA Zip Code 30643-1864

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-13529

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Jim W Phillips, Jr

Mailing Address 2601 W Market St

City Greensboro State NC Zip Code 27403-1521

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB28A-13530

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 719 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert Phillips

Mailing Address 520 Silverado Dr

City State Zip Code  
Lafayette CA 94549-5726

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13531

Date of Disbursement

/   /

Amount of Each Disbursement this Period

295.00

**B.**

Full Name (Last, First, Middle Initial)  
Kaola Phoenix

Mailing Address 103 Longwood Dr

City State Zip Code  
Chapel Hill NC 27514-9502

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13532

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David Pridham

Mailing Address 25 Linden Rd

City State Zip Code  
Barrington RI 02806-3807

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13533

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4895.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 720 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Regina Pyle

Mailing Address 124 Mt Auburn St Ste 200N

City State Zip Code  
Cambridge MA 02138-5787

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13534

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kevin W Pyne

Mailing Address 5741 Theresa

City State Zip Code  
Niagara Falls ON 0

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13535

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Jan J Quesada

Mailing Address 4523 Bluffview Blvd

City State Zip Code  
Dallas TX 75209-1901

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13537

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 721 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Michael Quinto

Mailing Address 500 Yarmouth Rd

City Raleigh State NC Zip Code 27608-1032

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13538

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Lisa Rice

Mailing Address 676 Olde Salt Run

City Mt Pleasant State SC Zip Code 29464-2788

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13539

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Beth Richardson

Mailing Address 718 Heidt St

City Columbia State SC Zip Code 29205-1702

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13540

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 722 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
Matthew T Richardson

Mailing Address 718 Heidt St

City Columbia State SC Zip Code 29205-1702

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13541

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
Penelope Roeder

Mailing Address 8174 Manitoba St.

City Playa del Rey State CA Zip Code 90293

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13542

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

1250.00

C.

Full Name (Last, First, Middle Initial)  
Donna Rogers

Mailing Address 100 S Main St

City Greeneville State TN Zip Code 37743-4922

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13543

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional) .....

5850.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 723 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John Rogers

Mailing Address 100 S Main St

City State Zip Code  
Greeneville TN 37743-4922

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13544

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Sara Roizman

Mailing Address 6 Mimosa Cir

City State Zip Code  
Lafayette Hill PA 19444-2407

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13545

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**C.**

Full Name (Last, First, Middle Initial)  
Ellen Rose

Mailing Address 118 S 21st St Apt 1303

City State Zip Code  
Philadelphia PA 19103-4427

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13546

Date of Disbursement

/   /

Amount of Each Disbursement this Period

368.28

**SUBTOTAL** of Disbursements This Page (optional) .....

4368.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 724 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth Ross

Mailing Address 770 Park Ave

City State Zip Code  
New York NY 10021-4153

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13547

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel Rottier

Mailing Address 150 E Gilman St

City State Zip Code  
Madison WI 53703-1499

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13548

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
C Arthur Rutter

Mailing Address 1913 Lynn Cove Ln

City State Zip Code  
Virginia Beach VA 23454-1007

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13549

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 725 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Sadek

Mailing Address 3 Longboat

City Newport Coast State CA Zip Code 92657-1538

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13551

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Perry Safran

Mailing Address 1424 Granada Dr

City Raleigh State NC Zip Code 27612-5109

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13552

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Charles A Sanders

Mailing Address 3200 Rugby Rd

City Durham State NC Zip Code 27707-5429

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13553

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 726 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth Sanders

Mailing Address 3200 Rugby Rd

City Durham State NC Zip Code 27707-5429

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13554

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Ricky Sandler

Mailing Address 1175 Park Ave  
Apt 14A

City New York State NY Zip Code 10128-1211

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13555

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Tasha Savage

Mailing Address 2093 Lakeline Dr

City Salt Lake City State UT Zip Code 84109-1487

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13556

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1040.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3540.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 727 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Janet Kane Scapin

Mailing Address 284 Hardenburgh Ave

City State Zip Code  
Demarest NJ 07627-1313

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13557

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen Mondon Scarpulla

Mailing Address 3708 Clay St

City State Zip Code  
San Francisco CA 94118-1806

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13558

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Oliver Schietinger

Mailing Address 107 Berkeley Place, #1R

City State Zip Code  
Brooklyn NY 11217

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13560

Date of Disbursement

/   /

Amount of Each Disbursement this Period

69.16

**SUBTOTAL** of Disbursements This Page (optional) .....

469.16

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 728 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Barbara Schlesinger

Mailing Address 387 Ocean Blvd

City State Zip Code  
Golden Beach FL 33160-2211

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13561

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
Shelton J Schlesinger

Mailing Address 387 Ocean Blvd

City State Zip Code  
Golden Beach FL 33160-2211

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13562

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Harold A Schlicksup

Mailing Address 411 Hamilton Blvd Ste 1720

City State Zip Code  
Peoria IL 61602-1194

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13563

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6200.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 729 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Alexis Schulman

Mailing Address 236 3rd St NW

City Canton State OH Zip Code 44702-1518

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13564

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jed Seidel

Mailing Address 1821 Courtney Terrace

City Los Angeles State CA Zip Code 90046

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13565

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)  
Les Seplaki

Mailing Address 200 Old Palisade Rd

City Fort Lee State NJ Zip Code 07024-7056

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13566

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4615.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 730 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Richard A Sessions

Mailing Address 17398 SW Brandyshire Ct

City Portland State OR Zip Code 97224-7607

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13567

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)  
David Shapiro

Mailing Address 2109 Broadway

City New York State NY Zip Code 10023-2106

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13569

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
William D Shapiro

Mailing Address 432 N Arrowhead Ave

City San Bernardino State CA Zip Code 92401-1421

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13570

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 731 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Andre Sherman

Mailing Address 3555 Giddings Ranch Rd

City Altadena State CA Zip Code 91001-3800

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13572

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Imelda Simon

Mailing Address 108 Cowards Creek

City Friendswood State TX Zip Code 77546

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13573

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Wallace J Smith

Mailing Address PO Box 947

City Chico State CA Zip Code 95927-0947

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13575

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 732 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
John M Sobrato

Mailing Address 16000 Cuvilly Ct

City State Zip Code  
Saratoga CA 95070-6376

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13577

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Sokolove

Mailing Address 1340 Centre St  
Ste 102

City State Zip Code  
Newton Center MA 02459-2453

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13578

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Amy F Solomon

Mailing Address 430 Crane Blvd

City State Zip Code  
Los Angeles CA 90065-5053

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13579

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 733 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) William G Spears	<b>Transaction ID:</b> SB28A-13580 <b>Date of Disbursement</b>																				
Mailing Address 920 5th Ave Apt 9A	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City New York State NY Zip Code 10021-4160	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Stapleton	<b>Transaction ID:</b> SB28A-13581 <b>Date of Disbursement</b>																				
Mailing Address 11 rue Dali	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Candiatic State QU Zip Code J5R 6-H2	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Anna F Stein	<b>Transaction ID:</b> SB28A-13582 <b>Date of Disbursement</b>																				
Mailing Address 310 E Forest Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Raleigh State NC Zip Code 27605-1754	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 734 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

A.

Full Name (Last, First, Middle Initial)  
M Durwood Stephenson

Mailing Address PO Box 1187

City Smithfield State NC Zip Code 27577-1187

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13583

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

B.

Full Name (Last, First, Middle Initial)  
Irene C Strafford

Mailing Address 45 Coolidge Hill Rd

City Cambridge State MA Zip Code 02138-5509

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13584

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
Peter Strand

Mailing Address 574 Lado Dr

City Goleta State CA Zip Code 93111-1520

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28A-13585

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sherwin Suddreth

Mailing Address 1405 Jarvis St

City Raleigh State NC Zip Code 27608-2208

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13586

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
E Elizabeth Summers

Mailing Address 3932 Reinhardt Dr

City Oakland State CA Zip Code 94619-1624

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13587

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Dale M. Swope

Mailing Address 1234 E 5th Ave

City Tampa State FL Zip Code 33605-4904

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13588

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 736 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Jonathan G Taft

Mailing Address PO Box 566

City Greenville State NC Zip Code 27835-0566

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13589

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kathy Taft

Mailing Address 3024 Dartmouth Dr

City Greenville State NC Zip Code 27858-6745

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13590

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas F Taft, Sr

Mailing Address PO Box 566

City Greenville State NC Zip Code 27835-0566

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13591

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 737 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Mark A Tate

Mailing Address 2 E Bryan St

City Savannah State GA Zip Code 31401-2655

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13592

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Valerie Taylor

Mailing Address 204 Lakewater Dr

City Cary State NC Zip Code 27511-7266

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13593

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David R Teddy

Mailing Address 139 Westfield Rd

City Shelby State NC Zip Code 28150-4856

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13594

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 738 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Janice Toben

Mailing Address 12 Santa Maria Avenue

City State Zip Code  
Portola Valley CA 94028

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13596

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Susan Truitt

Mailing Address 63 Blue Heron Dr

City State Zip Code  
Osterville MA 02655-2006

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13597

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1245.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Tully

Mailing Address 4315 Greenwood Dr

City State Zip Code  
Des Moines IA 50312-2553

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13598

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5845.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 739 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Lawrence Walker

Mailing Address 1136 Joe Quick Rd

City State Zip Code  
Hazel Green AL 35750

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

71.48

**B.**

Full Name (Last, First, Middle Initial)  
William Walser

Mailing Address 2224 Western Park Ln

City State Zip Code  
Hillsborough NC 27278-9395

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13600

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Deborah Warren-Hicks

Mailing Address 6429 Sykes Glen Trail

City State Zip Code  
Mebane NC 27302-8288

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13601

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3121.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 740 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Weisner

Mailing Address 10565 Blythe Ave

City State Zip Code  
Los Angeles CA 90064-3338

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13602

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)  
Catherine C Weiss

Mailing Address 2660 Peachtree Rd NW Apt 37B

City State Zip Code  
Atlanta GA 30305-3682

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13603

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Francis X Wentworth

Mailing Address PO Box 68

City State Zip Code  
Mendham NJ 07945-0068

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13604

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 741 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Cheryl J Wicker

Mailing Address 209 W University Dr

City  
Chapel Hill

State  
NC

Zip Code  
27516-2920

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Harold L Wilensky

Mailing Address 1311 Grizzly Peak Blvd

City  
Berkeley

State  
CA

Zip Code  
94708-2129

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13606

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Gail Wilkes

Mailing Address 2802 S Beach Dr

City  
Tampa

State  
FL

Zip Code  
33629-7505

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13607

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 742 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
James Wilkes

Mailing Address 1 N Dale Mabry Hwy Ste 800

City Tampa State FL Zip Code 33609-2755

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Carole P Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513-5559

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13610

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
C. Steven Yerrid

Mailing Address 101 E Kennedy Blvd Ste 3910

City Tampa State FL Zip Code 33602-5192

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13611

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 743 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Todd C Zapolski	<b>Transaction ID:</b> SB28A-13612 <b>Date of Disbursement</b>																				
Mailing Address 1527 Hermitage Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Durham State NC Zip Code 27707-1634	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Stephen Zayton	<b>Transaction ID:</b> SB28A-13613 <b>Date of Disbursement</b>																				
Mailing Address PO Box 262	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Cary State NC Zip Code 27512-0262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Keith J Halleland	<b>Transaction ID:</b> SB28A-13699 <b>Date of Disbursement</b>																				
Mailing Address 220 S 6th St Ste 600	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Minneapolis State MN Zip Code 55402-1430	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**5600.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 744 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Stephanie Low

Mailing Address 1215 5th Ave.

City State Zip Code  
New York NY 10029

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13700

Date of Disbursement

/   /

Amount of Each Disbursement this Period

900.00

**B.**

Full Name (Last, First, Middle Initial)  
Daryl J Morton

Mailing Address 109 Carriage Way

City State Zip Code  
Macon GA 31210-8624

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13701

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen Shavitz

Mailing Address 209 Manchester PI

City State Zip Code  
Greensboro NC 27410-6083

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 745 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

W Thomas Comerford

Mailing Address 3500 Stonegate Ct

City  
Winston Salem

State  
NC

Zip Code  
27104-1824

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13615

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Randal A Nardone

Mailing Address 1345 Avenue of The Americas

City  
New York

State  
NY

Zip Code  
10105-0302

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**C.**

Full Name (Last, First, Middle Initial)

Gilbert L Purcell

Mailing Address 222 Rush Landing Rd

City  
Novato

State  
CA

Zip Code  
94945-2469

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 746 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Catherine C Weiss

Mailing Address 2660 Peachtree Rd NW Apt 37B

City Atlanta State GA Zip Code 30305-3682

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13618

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Zaytoun

Mailing Address 304 Hillcrest Rd

City Raleigh State NC Zip Code 27605-1722

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Dennis Gilardi

Mailing Address 3301 Kerner Blvd

City San Rafael State CA Zip Code 94901-4856

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13620

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**SUBTOTAL** of Disbursements This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 747 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Kenneth F Park

Mailing Address 655 W Broadway  
Suite 1900

City San Diego State CA Zip Code 92101-8498

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
David Rigsby

Mailing Address PO Box 44

City Embudo State NM Zip Code 87531-0044

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13623

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
James R Pratt

Mailing Address 3904 Seven Bark Cir

City Birmingham State AL Zip Code 35243-5909

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13624

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 748 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Vicki Slater

Mailing Address 146 Cypress Rd

City Jackson State MS Zip Code 39272-6048

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13625

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)

Drew Edwards

Mailing Address 511 Crested Hawk Rdg

City Canton State GA Zip Code 30114-5111

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13626

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

David C Walton

Mailing Address 12336 Goldfish Ct

City San Diego State CA Zip Code 92129-4567

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13627

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 749 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Bernard J Hargadon

Mailing Address 435 S Tryon St  
Unit 606

City Charlotte State NC Zip Code 28202-1907

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13628

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Allan Kanner

Mailing Address 1550 Dufossat St

City New Orleans State LA Zip Code 70115-4023

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13629

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Andrew Gay

Mailing Address 2401 Pennsylvania Ave  
Apt 11C44

City Philadelphia State PA Zip Code 19130-3041

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13630

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 750 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Sean Doyle

Mailing Address 138 W 17th St  
Apt 3

City New York State NY Zip Code 10011-5412

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13631

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Nicolas J Hanauer

Mailing Address 1000 2nd Ave  
Ste 1200

City Seattle State WA Zip Code 98104-1050

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13632

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Monte Lipman

Mailing Address 19 Stone Paddock Pl

City Bedford State NY Zip Code 10506-1058

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13633

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 751 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Robert E Lahm

Mailing Address 234 Dewitt St

City State Zip Code  
Syracuse NY 13203-1636

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13634

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**B.**

Full Name (Last, First, Middle Initial)  
Doc McGhee

Mailing Address 23002 Java Sea Dr

City State Zip Code  
Monarch Beach CA 92629-3513

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13635

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
David Meyer

Mailing Address 2252 Tremont Rd

City State Zip Code  
Columbus OH 43221-4241

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13636

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 752 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<b>A.</b> Full Name (Last, First, Middle Initial) Indra Noel Chatterjee <hr/> Mailing Address 1071 Suffolk Way <hr/> City Los Altos State CA Zip Code 94024-5527 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-13637 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
<hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">2300.00</div>	<hr/>																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mitchell Winter <hr/> Mailing Address 350 Central Park W Apt 6D <hr/> City New York State NY Zip Code 10025-6501 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-13638 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
<hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">2300.00</div>	<hr/>																				
<b>C.</b> Full Name (Last, First, Middle Initial) Norman Peters <hr/> Mailing Address 3679 Sperone Dr <hr/> City Canfield State OH Zip Code 44406-8000 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-13640 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
<hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">2300.00</div>	<hr/>																				

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**6900.00**

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 753 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Samuel K Rosen

Mailing Address 10 Waterside Plz  
Apt 17D

City State Zip Code  
New York NY 10010-2604

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard L Tate

Mailing Address 29102 Walker Ln

City State Zip Code  
Richmond TX 77469-7712

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Rhon E Jones

Mailing Address 9272 Gainswood

City State Zip Code  
Montgomery AL 36117-5120

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13643

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 754 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Cecil Gardner

Mailing Address PO Box 3103

City State Zip Code  
Mobile AL 36652-3103

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13645

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Scott Swall

Mailing Address 108 Marvin Ave

City State Zip Code  
Los Altos CA 94022-3710

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13646

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Diogenes P Kekatos

Mailing Address 38 Whitson St

City State Zip Code  
Forest Hills NY 11375-6852

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13647

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 755 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Stephen A Weiss</p> <p>Mailing Address 969 Park Ave PH A</p> <p>City New York State NY Zip Code 10028-0322</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13648</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Alan R Tresidder</p> <p>Mailing Address 8714 SW 49th Ave</p> <p>City Portland State OR Zip Code 97219-3357</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13649</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Peter Detkin</p> <p>Mailing Address 280 Valley St</p> <p>City Los Altos State CA Zip Code 94022-3747</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-13650</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2300.00</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► 6900.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Joel Persky

Mailing Address 1030 5th Ave

City Pittsburgh State PA Zip Code 15219-6219

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13651

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kenneth W Hooks

Mailing Address 2034 Country Club Rd

City Birmingham State AL Zip Code 35244

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13652

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Milton McGregor

Mailing Address 1506 S Perry St

City Montgomery State AL Zip Code 36104-5604

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13653

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 757 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Malcolm Bailey

Mailing Address 606 Bailey Rd

City State Zip Code  
Keyssville VA 23947-2703

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13654

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Walter I Jenkins

Mailing Address PO Box 1208

City State Zip Code  
Biscoe NC 27209-1208

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13655

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
John B Morgan

Mailing Address 1887 Bridgewater Dr

City State Zip Code  
Lake Mary FL 32746-6910

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13656

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 758 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Douglas F Patrick

Mailing Address PO Box 2343

City Greenville State SC Zip Code 29602-2343

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13657

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
James Bartimus

Mailing Address 11541 Cherokee Ct

City Leawood State KS Zip Code 66211-3080

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
James Kelleher

Mailing Address 669 9th Ave S

City Naples State FL Zip Code 34102-6937

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 759 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Washburn S Oberwager

Mailing Address 100 Cherynd Dr

City State Zip Code  
Bryn Mawr PA 19010

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13660

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)  
Kevin W Pyne

Mailing Address 5741 Theresa St

City State Zip Code  
Niagara Falls CN 0

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13661

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4500.00

**C.**

Full Name (Last, First, Middle Initial)  
David Shapiro

Mailing Address 2109 Broadway

City State Zip Code  
New York NY 10023-2106

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13662

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 760 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

E Spencer Parris

Mailing Address 410 Glenwood Ave

City Raleigh State NC Zip Code 27603-1249

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13663

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Marc Jay Bern

Mailing Address 65 First Neck Ln

City Southampton State NY Zip Code 11968-4703

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13664

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)

John A Lancione

Mailing Address 31730 Maritime Ct

City Avon Lake State OH Zip Code 44012-2903

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13665

Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

1900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4200.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 761 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Theodore A Gulas

Mailing Address 2043 Country Ridge Cir

City Birmingham State AL Zip Code 35243-4307

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Cucchiara

Mailing Address 81 Meadow Ridge Ln

City Chapel Hill State NC Zip Code 27517-8810

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13667

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Hal K Gillespie

Mailing Address 3402 Oak Grove Ave Ste 200

City Dallas State TX Zip Code 75204-2391

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13668

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 762 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)

Craig H Schiffer

Mailing Address 40 Beekman Ter

City  
Summit

State  
NJ

Zip Code  
07901-1730

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13669

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Cathryn Belz Foley

Mailing Address 75 Meadow Rd

City  
Buffalo

State  
NY

Zip Code  
14216-3613

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13670

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**C.**

Full Name (Last, First, Middle Initial)

Barry Chasen

Mailing Address 12088 Wetherfield Ln

City  
Potomac

State  
MD

Zip Code  
20854-1111

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 763 / 774

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.**

Full Name (Last, First, Middle Initial)  
Paul J Pennock

Mailing Address 180 Morda Ln, 17th Fl

City State Zip Code  
New York NY 10038

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13672

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**B.**

Full Name (Last, First, Middle Initial)  
Gregg Hymowitz

Mailing Address 205 E 61st St

City State Zip Code  
New York NY 10021-8203

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13673

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4600.00

**C.**

Full Name (Last, First, Middle Initial)  
Brian L Zimmerman

Mailing Address 5840 Knob Hill Dr., NW

City State Zip Code  
Canton OH 44718

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB28A-13702

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8400.00

**TOTAL** This Period (last page this line number only) .....

3456089.10

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 764 / 774

FOR LINE NUMBER:  
(check only one)☐ 19a  
☒ 19bNAME OF COMMITTEE (In Full)  
John Edwards for President

Transaction ID: SC-38

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

BB&amp;T

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address Branch 12501

City Alexandria State VA ZIP Code 22314

Original Amount of Loan

5260544.00

Cumulative Payment To Date

5260544.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M D D Y Y Y Y  
1 1 3 0 2 0 0 7

Date Due

05/31/2008

Interest Rate

prime+5% (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 765 / 774

FOR LINE NUMBER:  
(check only one)☐ 19a  
☒ 19bNAME OF COMMITTEE (In Full)  
John Edwards for President

Transaction ID: SC-41

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

BB&amp;T

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address Branch 12501

City Alexandria

State VA

ZIP Code 22314

Original Amount of Loan

2682338.00

Cumulative Payment To Date

2143524.77

Balance Outstanding at Close of This Period

538813.23

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
1 9Y Y Y Y  
2 0 0 7

05/31/2008

prime+5% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

538813.23

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 766 / 774

FOR LINE NUMBER:  
(check only one)
☐ 19a  
☒ 19b
NAME OF COMMITTEE (In Full)  
John Edwards for President

Transaction ID: SC-42

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

BB&amp;T

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address Branch 12501

City Alexandria

State VA

ZIP Code 22314

Original Amount of Loan

1031832.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1031832.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

☐ M M  
☐ 1 2

☐ D D  
☐ 2 8

☐ Y Y Y Y  
☐ 2 0 0 7

05/31/2008

prime+5% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1031832.00

**TOTALS** This Period (last page in this line only) ▶

1570645.23

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for  
Information found on  
Page 767 / 774 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full)  <b>John Edwards for President</b>		<b>FEC IDENTIFICATION NUMBER</b>  C00431205	
Back Ref ID: SC-38			
<b>LENDING INSTITUTION (LENDER)</b> Full Name BB&T	Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: center;">5260544.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; text-align: center;">Prime+.50 %</div>	
Mailing Address Branch 12501		Date Incurred or Established <div style="display: flex; justify-content: space-around;"><div>11</div><div>30</div><div>2007</div></div>	
City Alexandria	State VA	Zip Code 22314	
Date Due <div style="border: 1px solid black; padding: 2px;">20080531</div>			
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>			
B. If line of credit,  Amount of this Draw: <div style="border: 1px solid black; padding: 2px; text-align: center;">5260544.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; text-align: center;">5260544.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>Matching Funds</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; text-align: center;">7515063.94</div> Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142.  Date account established: <div style="display: flex; justify-content: space-around;"><div>10</div><div>22</div><div>2007</div></div>		Location of account BB&T Address: 1717 Kings Street City, State, Zip: Alexandria VA 22314	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Julius Chambers Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div>11</div><div>30</div><div>2007</div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Carolyn Pelton Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div>11</div><div>30</div><div>2007</div></div>	
Title Senior VP			

# **LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page 768 / 774 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full)  <b>John Edwards for President</b>		<b>FEC IDENTIFICATION NUMBER</b>  C00431205	
<b>LENDING INSTITUTION (LENDER)</b> Full Name BB&T		Back Ref ID: SC-41	
Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: center;">2682338.00</div>		Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; text-align: center;">Prime+.50 %</div>	
Mailing Address Branch 12501		Date Incurred or Established <div style="display: flex; justify-content: space-around;"><div>12</div><div>19</div><div>2007</div></div>	
City Alexandria	State VA	Zip Code 22314	
Date Due <div style="border: 1px solid black; padding: 2px;">20080531</div>			
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>			
B. If line of credit,  Amount of this Draw: <div style="border: 1px solid black; padding: 2px; text-align: center;">2682338.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; text-align: center;">7942882.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>Matching Funds</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; text-align: center;">8825424.82</div>  Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: <u> </u>		What is the estimated value? <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142.  Date account established: <div style="display: flex; justify-content: space-around;"><div>10</div><div>22</div><div>2007</div></div>		Location of account BB&T  Address: 1717 Kings Street  City, State, Zip: Alexandria VA 22314	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Julius Chambers Signature		DATE <div style="display: flex; justify-content: space-around;"><div>11</div><div>30</div><div>2007</div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Carolyn Pelton Signature		DATE <div style="display: flex; justify-content: space-around;"><div>11</div><div>30</div><div>2007</div></div>	
Title Senior VP			



# LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for  
Information found on  
Page 769 / 774 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) <b>John Edwards for President</b>		<b>FEC IDENTIFICATION NUMBER</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">C00431205</div>	
<b>LENDING INSTITUTION (LENDER)</b> Full Name BB&T		Back Ref ID: SC-42	
Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: center;">1031832.00</div>		Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; text-align: center;">Prime+.50 %</div>	
Mailing Address Branch 12501		Date Incurred or Established <div style="display: flex; justify-content: space-around;"><div>12</div><div>28</div><div>2007</div></div>	
City Alexandria		Date Due <div style="border: 1px solid black; padding: 2px; text-align: center;">20080531</div>	
State VA		Zip Code 22314	
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="display: flex; justify-content: space-around;"><div></div><div></div><div></div></div>			
B. If line of credit,  Amount of this Draw: <div style="border: 1px solid black; padding: 2px; text-align: center;">1031832.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; text-align: center;">8974714.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>Matching Funds</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; text-align: center;">9972364.34</div> Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142.  Date account established: <div style="display: flex; justify-content: space-around;"><div>10</div><div>22</div><div>2007</div></div>		Location of account BB&T Address: 1717 Kings Street City, State, Zip: <u>Alexandria</u> <u>VA</u> <u>22314</u>	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name <u>Julius Chambers</u> Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div>11</div><div>30</div><div>2007</div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name <u>Carolynne Pelton</u> Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div>11</div><div>03</div><div>2007</div></div>	
Title <u>Senior VP</u>			

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 770 / 774

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Dell Marketing, L.P. c/o Dell USA L.P.

Nature of Debt (Purpose):  
Technology Expense

Mailing Address 1200 East Campbell Road  
Suite 108 - Box 676032

City State ZIP Code  
Richardson TX 75081

Outstanding Balance Beginning This Period

3413.80

Transaction ID: SD-158

Amount Incurred This Period

0.00

Payment This Period

3413.80

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Purchase Power

Nature of Debt (Purpose):  
Postage

Mailing Address PO Box 856042

City State ZIP Code  
Louisville KY 40285-6042

Outstanding Balance Beginning This Period

496.31

Transaction ID: SD-181

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

496.31

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of NH

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

1866.93

Transaction ID: SD-184

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1866.93

1) **SUBTOTALS** This Period This Page (optional).....

2363.24

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 771 / 774

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Bryan Bluestein

Nature of Debt (Purpose):  
Travel

Mailing Address PO Box 323

City State ZIP Code  
Columbia SC 29202

Outstanding Balance Beginning This Period

824.52

Transaction ID: SD-186

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

824.52

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
A & B Printing

Nature of Debt (Purpose):  
Printing
Mailing Address 2900 South Highland  
Building 18 Suite B
City State ZIP Code  
Las Vegas NV 89109

Outstanding Balance Beginning This Period

505.35

Transaction ID: SD-163

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

505.35

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Soundpath Conferencing

Nature of Debt (Purpose):  
Telephone

Mailing Address PO Box 33667

City State ZIP Code  
Washington DC 20033-3667

Outstanding Balance Beginning This Period

17666.86

Transaction ID: SD-185

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17666.86

1) **SUBTOTALS** This Period This Page (optional).....

18996.73

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
PDQ Printing

Nature of Debt (Purpose):  
Printing

Mailing Address 3820 South Valley View Blvd

City State ZIP Code  
Las Vegas NV 89103

Outstanding Balance Beginning This Period

10906.99

Transaction ID: SD-183

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10906.99

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Premium Financing Specialists

Nature of Debt (Purpose):  
Insurance

Mailing Address PO Box 905131

City State ZIP Code  
Charlotte NC 28290-5131

Outstanding Balance Beginning This Period

8049.32

Transaction ID: SD-182

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8049.32

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T Mobility- Phoenix

Nature of Debt (Purpose):  
Telephone

Mailing Address PO Box 78405

City State ZIP Code  
Phoenix AZ 85062-8405

Outstanding Balance Beginning This Period

89383.05

Transaction ID: SD-187

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89383.05

1) **SUBTOTALS** This Period This Page (optional).....

108339.36

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T- Atlanta

Nature of Debt (Purpose):  
Telephone

Mailing Address PO Box 105262

City	State	ZIP Code
Atlanta	GA	30348-5262

Outstanding Balance Beginning This Period

387.16

Transaction ID: SD-189

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

387.16

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Wapsie School Music Booster Club

Nature of Debt (Purpose):  
Site Rental

Mailing Address 2535 Viking Avenue

City	State	ZIP Code
Fairbank	IA	50629

Outstanding Balance Beginning This Period

175.00

Transaction ID: SD-168

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

175.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
College of Charleston ATTN: Stan Gray

Nature of Debt (Purpose):  
Site Rental

Mailing Address Division of Marketing & Comm.  
66 George Street

City	State	ZIP Code
Charleston	SC	29424

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD-188

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

1) **SUBTOTALS** This Period This Page (optional).....

1062.16

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/>	11
<input checked="" type="checkbox"/>	12

NAME OF COMMITTEE (In Full)  
John Edwards for President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Carsey Institute Attn: C. Mildred Duncan, PhD

Nature of Debt (Purpose):  
Site Rental

Mailing Address University of New Hampshire  
Huddleston Hall

City State ZIP Code  
Durham NH 03824

Outstanding Balance Beginning This Period

1054.13

Transaction ID: SD-190

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1054.13

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1054.13

2) **TOTALS** This Period (last page this line number only)..... ▶

131815.62

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

1570645.23

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1702460.85